


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 18, 2008 08:00 AM
Secretary of State

DOCUMENT # P07000135248 1. Entity Name ALDRICH INSURANCE AND FINANCIAL SERVICES, INC	
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Principal Place of Business 10470 BAYLOR DR. SPRING HILL, FL 34608	Mailing Address 10470 BAYLOR DR. SPRING HILL, FL 34608
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DO NOT WRITE IN THIS SPACE



06092008 No Chg-P CR2E034 (11/05)

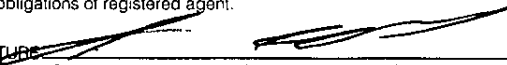
4. FEI Number 26-1595392	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALDRICH, JASON
 10470 BAYLOR DR.
 SPRING HILL, FL 34608

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: 6/10/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees


In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ALDRICH, JASON 10470 BAYLOR DR. SPRING HILL, FL 34608
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 06/18/08-80001-007 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: 6/10/08 DAYTIME PHONE: 352-232-3515

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR