## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000135248

Entity Name: ALDRICH INSURANCE AND FINANCIAL SERVICES, INC

FILED Apr 29, 2009 Secretary of State

Current Pr	rincipal Place	of Business:	New Principal Place of E	Business:	
	RTEZ BLVD. ACHEE, FL 34	613			
Current Ma	ailing Addres	s:	New Mailing Address:	New Mailing Address:	
	RTEZ BLVD. ACHEE, FL 34	613	13181 LINZIA LN SPRING HILL, FL 34609		
FEI Number:	26-1595392	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address of Ne	Name and Address of New Registered Agent:	
ALDRICH, 10470 BAY SPRING H		US	ALDRICH, JASON 13181 LINZIA LN SPRING HILL, FL 34609	US	
The above in the State		submits this statement for the	purpose of changing its registered off	ïce or registered agent, or both,	
SIGNATURE:				04/29/2009	
Electronic Signature of Registered Agent			gent	Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CHANGES 1	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () ALDRICH, JASO 13181 LINZIA L SPRING HILL, F	ANE	Title: ( ) 0 Name: Address: City-St-Zip:	Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JASON ALDRICH D 04/29/2009