## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000011797

Entity Name: CLEWISTON INSURANCE, INC.

FILED Jan 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

124 SWC OWENS AVE. 124 S WC OWENS AVE. CLEWISTON, FL 33440 CLEWISTON, FL 33440

Current Mailing Address: New Mailing Address:

PO BOX 125 CLEWISTON, FL 33440

FEI Number: 26-1910271 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FILINGS, INC.

3732 NW 16TH ST.

FT. LAUDERDALE, FL 33311 US

HERNANDEZ, ERICA L

426 E OBISPO AVE

CLEWISTON, FL 33440 US

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.

SIGNATURE: ERICA HERNANDEZ 01/05/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 ( ) Delete
 Title:
 D
 (X) Change ( ) Addition

 Name:
 HERNANDEZ, ERICA
 Name:
 HERNANDEZ, ERICA L OWNER

 Address:
 P. O. BOX 125
 Address:
 P. O. BOX 125

City-St-Zip: CLEWISTON, FL 33440 City-St-Zip: CLEWISTON, FL 33440

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: ERICA HERNANDEZ OWNE 01/05/2009