

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000014342

FILED
Jan 24, 2011
Secretary of State

Entity Name: THE CAMBRIDGE INSURANCE AGENCY, INC.

Current Principal Place of Business:

6320 S. DALE MABRY HIGHWAY
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

6320 S. DALE MABRY HIGHWAY
TAMPA, FL 33611

New Mailing Address:

FEI Number: 80-0145971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEITLER, CLAYTON
6320 S DALE MABRY
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD
Name: HEITLER, CLAYTON
Address: 6320 SOUTH DALE MABRY HIGHWAY
City-St-Zip: TAMPA, FL 33611

Title: VD
Name: CURRIER, CLAYTON
Address: 6320 S. DALE MABRY HIGHWAY
City-St-Zip: TAMPA, FL 33611

I hereby 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 all other like empowered.

SIGNATURE: CH _____

Electronic Signature of Signing Officer or Director

PRES _____

01/24/2011 _____

Date