

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000024647

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: ACCURATE INSURANCE AGENCY, INC.

## Current Principal Place of Business:

1425 DEL PRADO BLVD  
CAPE CORAL, FL 33990 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 66  
FORT MYERS, FL 33928 US

## New Mailing Address:

PO BOX 66  
FORT MYERS, FL 33929 US

FEI Number: 26-2133635

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MEYER, ALICIA A  
9256 CYPRESS DR. N.  
FORT MYERS, FL 33967 US

## Name and Address of New Registered Agent:

MEYER, ALICIA A  
13311 GREENGATE BLVD  
#625  
FORT MYERS, FL 33919 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: ALICIA A. MEYER

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MEYER, ALICIA A  
Address: 9256 CYPRESS DR. N.  
City-St-Zip: FORT MYERS, FL 33967

Title: VP ( ) Delete  
Name: ROBERTS, THOMAS LAWTON  
Address: 6859 PENTLAND WAY #33  
City-St-Zip: FORT MYERS, FL 33966

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MEYER, ALICIA A  
Address: 13311 GREENGATE BLVD #625  
City-St-Zip: FORT MYERS, FL 33919

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ALICIA A. MEYER

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date