

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000031930

FILED
Apr 06, 2009
Secretary of State

Entity Name: SOUTHWEST RANCHES INSURANCE AGENCY, INC.

Current Principal Place of Business:

5030 SW 173 WAY
SOUTHWEST RANCHES, FL 33331

New Principal Place of Business:

1560 SAWGRASS CORPORATE PKWY
4TH FLOOR
SUNRISE, FL 33323

Current Mailing Address:

5030 SW 173 WAY
SOUTHWEST RANCHES, FL 33331

New Mailing Address:

1560 SAWGRASS CORPORATE PKWY
SUNRISE, FL 33323

FEI Number: 26-2277675

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRAUS, ARNOLD M. JR. ESQ
10081 PINES BLVD., STE. C
PEMBROKE PINES, FL 333024 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARON, PETER A
Address: 5030 SW 173 WAY
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: S () Delete
Name: BARON, DIANE
Address: 5030 SW 173 WAY
City-St-Zip: SOUTHWEST RANCHES, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: BARON, DIANA
Address: 5030 SW 173 WAY
City-St-Zip: SOUTHWEST RANCHES, FL 33331

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: PETER A BARON

PRES

04/06/2009

Electronic Signature of Signing Officer or Director

Date