

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000038395

FILED
Jun 23, 2009
Secretary of State

Entity Name: CASSIDY COLLIER INSURANCE SERVICES INC

Current Principal Place of Business:

11700 WATERBEND COURT
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

11700 WATERBEND COURT
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 26-2409727

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLIER, MARTHA M
11700 WATERBEND COURT
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

COLLIER, KEVIN F
11700 WATERBEND COURT
WELLINGTON, FL 33414 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: KEVIN COLLIER

06/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COLLIER, MARTHA M
Address: 11700 WATERBEND COURT
City-St-Zip: WELLINGTON, FL 33414

Title: VP () Delete
Name: BREWER, MARY
Address: 12489 WORLD CUP LANE
City-St-Zip: WELLINGTON, FL 33414

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COLLIER, KEVIN F
Address: 11700 WATERBEND COURT
City-St-Zip: WELLINGTON, FL 33414

Title: VP (X) Change () Addition
Name: COLLIER, MARTHA M
Address: 11700 WATERBEND COURT
City-St-Zip: WELLINGTON, FL 33414

Title: SECR () Change (X) Addition
Name: BREWER, MARY
Address: 12489 WORLD CUP LANE
City-St-Zip: WELLINGTON, FL 33414

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: KEVIN COLLIER

PRES

06/23/2009

Electronic Signature of Signing Officer or Director

Date