

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000042590

FILED
Feb 22, 2011
Secretary of State

Entity Name: BRYAN SCHOFIELD INSURANCE, INC.

Current Principal Place of Business:

105 W. SUMMIT STREET
WAUCHULA, FL 33873

New Principal Place of Business:

6350 COCOA LN
APOLLO BEACH, FL 33572

Current Mailing Address:

105 W. SUMMIT STREET
WAUCHULA, FL 33873

New Mailing Address:

6350 COCOA LN
APOLLO BEACH, FL 33572

FEI Number: 26-2614764

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOFIELD, BRYAN
105 W. SUMMIT STREET
WAUCHULA, FL 33873 US

Name and Address of New Registered Agent:

SCHOFIELD, BRYAN
6350 COCOA LN
APOLLO BEACH, FL 33572 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:

02/22/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: SCHOFIELD, BRYAN
Address: 6350 COCOA LN
City-St-Zip: APOLLO BEACH, FL 33572

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: BRYAN SCHOFIELD

P

02/22/2011

Electronic Signature of Signing Officer or Director

Date