2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2012
Secretary of State

DOCUMENT# P08000081284

Entity Name: ASSOCIATION INSURANCE ADVISORS, INC.

Current Principal Place of Business:

1215 E. HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

Current Mailing Address:

1215 E. HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441

New Mailing Address:

FEI Number: 26-3300019 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BEIGHLEY, MYRICK & UDELL, PA
1255 W. ATLANTIC BLVD.
#314
POMPANO BEACH, FL 33069 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: TIGHT, ALVIN J III
Address: 1215 E. HILLSBORO BLVD.
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: VPD
Name: CAMPBELL, WILLIAM B III
Address: 1215 E. HILLSBORO BLVD.
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: SD
Name: CAMPBELL, BRUCE R
Address: 1215 E. HILLSBORO BLVD.
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: TD
Name: ROSEMURGY, JAMES M
Address: 1215 E. HILLSBORO BLVD.
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: D
Name: TIGHT, BRIAN
Address: 1215 E. HILLSBORO BLVD.
City-St-Zip: DEERFIELD BEACH, FL 33441

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: ALVIN J. TIGHT, III PD 03/21/2012

Electronic Signature of Signing Officer or Director Date