2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2010
Secretary of State

DOCUMENT# P08000095523

Entity Name: ANGIE LEWIS INSURANCE AGENCY INC

Current Principal Place of Business:

1017 NE 14TH ST
OCALA, FL 34470

New Principal Place of Business:

1122 NE 36TH AVE
OCALA, FL 34470

Current Mailing Address:

1017 NE 14TH ST
OCALA, FL 34470

New Mailing Address:

1122 NE 36TH AVE
OCALA, FL 34470

FEI Number: 26-3562396 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LEWIS, ANGIE R
3280 SE 20TH AVE
OCALA, FL 34471 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
Name: LEWIS, ANGIE R
Address: 3280 SE 20TH AVE
City-St-Zip: OCALA, FL 34471

Title: VP
Name: LEWIS, CLINTON W
Address: 3280 SE 20TH AVE
City-St-Zip: OCALA, FL 34471

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: ANGIE R LEWIS P 01/08/2010
Electronic Signature of Signing Officer or Director Date