2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000015856

Entity Name: NORTH SHORE INSURANCE SERVICES, INC.

FILED Jan 08, 2011 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
2727 POINTE CIRCLE GREENACERS, FL 33413	
Current Mailing Address:	New Mailing Address:
2727 POINTE CIRCLE GREENACERS, FL 33413	
FEI Number: 26-4292596 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
ORLOFF, TODD P 2727 POINTE CIRLCE GREENACERS, FL 33413 US	
The above named entity submits this statement for the puin the State of Florida.	urpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Ager	nt Date

OFFICERS AND DIRECTORS:

Title:

 Name:
 ORLOFF, TODD P

 Address:
 2727 POINTE CIRCLE

 City-St-Zip:
 GREENACERS, FL 33413 US

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: TODD ORLOFF P 01/08/2011