2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2011
Secretary of State

DOCUMENT# P09000061038

Entity Name: BOLIN INSURANCE & FINANCIAL SERVICES, INC.

Current Principal Place of Business:

2785 WRIGHTS ROAD
#1113
OVIEDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

2660 LUCY AVENUE
KISSIMMEE, FL 34744 US

New Mailing Address:

2785 WRIGHTS ROAD
#1113
OVIEDO, FL 32765 US

FEI Number: 27-0344380 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOLIN, KRISTINA
2660 LUCY AVENUE
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

BOLIN, KRISTINA
2785 WRIGHTS ROAD
1113
OVIEDO, FL 32765 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: KRISTINA M BOLIN 01/30/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PST
Name: BOLIN, KRISTINA
Address: 2785 WRIGHTS ROAD #1113
City-St-Zip: OVIEDO, FL 32765 US

Title: D
Name: BOLIN, JEFFREY
Address: 2785 WRIGHTS ROAD #1113
City-St-Zip: OVIEDO, FL 32765 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: KRISTINA MARIE BOLIN PST 01/30/2011
Electronic Signature of Signing Officer or Director Date