

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000071298

FILED
Apr 21, 2011
Secretary of State

Entity Name: MADDEN INSURANCE RESTORATION, INC.

Current Principal Place of Business:

4201 THISTLE TERRACE LANE
VALRICO, FL 33596 US

New Principal Place of Business:

Current Mailing Address:

4201 THISTLE TERRACE LANE
VALRICO, FL 33596 US

New Mailing Address:

FEI Number: 27-0785115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD.
SUITE A-100
TAMPA, FL 33612 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: P, D
Name: MADDEN, HARRY J
Address: 4201 THISTLE TERRACE LANE
City-St-Zip: VALRICO, FL 33596 US

Title: S
Name: MADDEN, JOSEPH B
Address: 4201 THISTLE TERRACE LANE
City-St-Zip: VALRICO, FL 33596 US

Title: T
Name: MADDEN, JEFFREY S
Address: 4201 THISTLE TERRACE LANE
City-St-Zip: VALRICO, FL 33596 US

Title: VP
Name: MADDEN, SANDRA L
Address: 4201 THISTLE TERRACE LANE
City-St-Zip: VALRICO, FL 33596

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: HARRY J MADDEN

PRES

04/21/2011

Electronic Signature of Signing Officer or Director

Date