

PO9000084083

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

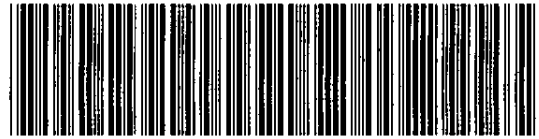
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**Malave, Erin**

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**From:** Stacey Phillips [staceyphillipsinsagency@hotmail.com]  
**Sent:** Monday, February 15, 2010 1:38 PM  
**To:** CorpAddressChange  
**Subject:** Stacey Phillips Insurance Agency, Inc. - Address Change

Please change address and add FEIN number to the following Corporation:

Stacey Phillips Insurance Agency, Inc.  
P09000084083  
Old Address: 2896 Phillips Road, Bonifay, Florida 32425  
New Address: 1701 S. Waukesha Street, Bonifay, Florida 32425  
FEIN -800503222

Thanks!  
Stacey

***Stacey M. Phillips, President***  
***Stacey Phillips Insurance Agency, Inc***  
***Post Office Box 163***  
***1701 S. Waukesha Street***  
***Bonifay, Florida 32425***  
***850.547.2042 Tele***  
***850.547.2793 Fax***

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