

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000099198

FILED
Apr 29, 2011
Secretary of State

Entity Name: SOMMERVILLE INSURANCE GROUP, INC.

Current Principal Place of Business:

516 YELLOW TAIL PLACE
CHULUOTA, FL 32766

New Principal Place of Business:

11 N SUMMERLIN AVE
230
ORLANDO, FL 32801

Current Mailing Address:

516 YELLOW TAIL PLACE
CHULUOTA, FL 32766

New Mailing Address:

FEI Number: 27-1446059 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SOMMERVILLE, KYLE
516 YELLOW TAIL PLACE
CHULUOTA, FL 32766 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: D
Name: SOMMERVILLE, KYLE
Address: 516 YELLOW TAIL PLACE
City-St-Zip: CHULUOTA, FL 32766

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: KYLE SOMMERVILLE

PRES

04/29/2011

Electronic Signature of Signing Officer or Director

Date