

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09070

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: SMALL BUSINESS INSURANCE AGENCY, INC.

## Current Principal Place of Business:

542 MAIN STREET  
PO BOX 15022  
WORCESTER, MA 016150022 US

## New Principal Place of Business:

542 MAIN STREET  
WORCESTER, MA 016150022 US

## Current Mailing Address:

542 MAIN STREET  
PO BOX 15022  
WORCESTER, MA 016150022 US

## New Mailing Address:

FEI Number: 04-2681269      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C/O C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: TD ( ) Delete  
Name: CARROLL, FRANCIS R  
Address: 11 HANCOCK HILL DRIVE  
City-St-Zip: WORCESTER, MA 01609

Title: S ( ) Delete  
Name: GREENLAW, PATRICIA A  
Address: 664 BURNCOAT STREET  
City-St-Zip: WORCESTER, MA 01606

Title: P ( ) Delete  
Name: CARROLL, BRIAN K  
Address: 10 PAUL REVERE RD  
City-St-Zip: WORCESTER, MA 01609

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: CARROLL, THOMAS J  
Address: 5329 CALLA VISTA  
City-St-Zip: SAN DIEGO, CA 92109

Title: D ( ) Change (X) Addition  
Name: SOULE, CHARLES E  
Address: 7 WYNGATE RD  
City-St-Zip: GREENWICH, CT 06830

Title: D ( ) Change (X) Addition  
Name: O'MALLEY, HUGH  
Address: 13810 SUTTON PARK DRIVE NORTH  
City-St-Zip: JACKSONVILLE, FL 32810

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PATRICIA A GREENLAW

S

04/27/2007

Electronic Signature of Signing Officer or Director

Date