

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P09937

FILED
Oct 10, 2006
Secretary of State

Entity Name: MANAGING GENERAL AGENTS, INC.

Current Principal Place of Business:

270 WALKER DRIVE
STATE COLLEGE, PA 16801

New Principal Place of Business:

Current Mailing Address:

270 WALKER DRIVE
STATE COLLEGE, PA 16801

New Mailing Address:

FEI Number: 25-1372168

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELOACH, KATHRYN M
832 S FLORIDA AVE
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

DELOACH, KATHRYN M
832 S FLORIDA AVE
SUITE 3B
LAKELAND, FL 33801 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: KATHRYN DELOACH

10/10/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MICNICHOL, ROBERT E JR
Address: 5909-A BRECKEN RIDGE PARKWAY
City-St-Zip: TAMPA, FL 33610

Title: TD () Delete
Name: DARE, EDWARD K III
Address: 270 WALKER DRIVE
City-St-Zip: STATE COLLEGE, PA 16801

Title: DS () Delete
Name: MCNICHOL, ROBERT E JR
Address: 270 WALKER DR
City-St-Zip: STATE COLLEGE, PA 16801

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MICNICHOL, ROBERT E JR
Address: 270 WALKER DRIVE
City-St-Zip: STATE COLLEGE, PA 16801

Title: VPD (X) Change () Addition
Name: DARE, EDWARD K III
Address: 270 WALKER DRIVE
City-St-Zip: STATE COLLEGE, PA 16801

Title: SEC (X) Change () Addition
Name: FLECK, KIMBERLI J
Address: 270 WALKER DR
City-St-Zip: STATE COLLEGE, PA 16801

Title: TRES () Change (X) Addition
Name: VAN BUSKIRK, DAVID A
Address: 270 WALKER DRIVE
City-St-Zip: STATE COLLEGE, PA 16801

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID A. VAN BUSKIRK

TRES

10/10/2006

Electronic Signature of Signing Officer or Director

Date