

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000018265

FILED  
Aug 18, 2011  
Secretary of State

Entity Name: COVERAGE SOLUTIONS INC

## Current Principal Place of Business:

7410 S. U.S. HWY., 1., STE 101  
PORT ST. LUCIE, FL 34952

## New Principal Place of Business:

7410 S. U.S. HWY., 1.  
SUITE 101  
PORT ST. LUCIE, FL 34952

## Current Mailing Address:

7410 S. U.S. HWY., 1., STE 101  
PORT ST. LUCIE, FL 34952

## New Mailing Address:

7410 S. U.S. HWY., 1.  
SUITE 101  
PORT ST. LUCIE, FL 34952

FEI Number: 80-0554941

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GAFFNEY, KAREN A  
805 VIRGINIA AVE  
SUITE 8  
FORT PIERCE, FL 34982 US

## Name and Address of New Registered Agent:

GAFFNEY, KAREN A  
7410 S. US HIGHWAY 1  
SUITE 101  
PORT SAINT LUCIE, FL 34952 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:

08/18/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: GAFFNEY, KAREN A  
Address: 1824 WILDCAT COVE DRIVE  
City-St-Zip: FORT PIERCE, FL 34949

Title: VP  
Name: GAFFNEY, JOHN G  
Address: 1824 WILDCAT COVE DRIVE  
City-St-Zip: FORT PIERCE, FL 34949

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: JOHN G. GAFFNEY

VP

08/18/2011

Electronic Signature of Signing Officer or Director

Date