

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000019217

FILED
Feb 08, 2011
Secretary of State

Entity Name: COASTAL COMMUNITY INSURANCE AGENCY OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

12139 PANAMA CITY BEACH PARKWAY
PANAMA CITY BEACH, FL 32407 US

New Principal Place of Business:

12129 PANAMA CITY BEACH PARKWAY
PANAMA CITY BEACH, FL 32407 US

Current Mailing Address:

12139 PANAMA CITY BEACH PARKWAY
PANAMA CITY BEACH, FL 32407 US

New Mailing Address:

12129 PANAMA CITY BEACH PARKWAY
PANAMA CITY BEACH, FL 32407 US

FEI Number: 27-2027855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUBOSE, E. ANTHONY
12139 PANAMA CITY BEACH PARKWAY
PANAMA CITY BEACH, FL 32407 US

Name and Address of New Registered Agent:

DUBOSE, E. ANTHONY
12129 PANAMA CITY BEACH PARKWAY
PANAMA CITY BEACH, FL 32407 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:

02/08/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: DUBOSE, E. ANTHONY
Address: 12129 PANAMA CITY BEACH PARKWAY
City-St-Zip: PANAMA CITY BEACH, FL 32407 US

Title: VP
Name: MARTIN, BETH A
Address: 411 ARGONAUT STREET
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

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: E. ANTHONY DUBOSE

PD

02/08/2011

Electronic Signature of Signing Officer or Director

Date