

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000028705

FILED
Feb 14, 2012
Secretary of State

Entity Name: FIRST CHOICE INSURANCE OF FLORIDA, INC.

Current Principal Place of Business:

111 2ND AVE. N.E.
STE 900
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

111 2ND AVE. N.E.
STE 900
ST. PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 27-2253822 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BARRY, TRACEY A
111 2ND AVE N.E.
STE 900
ST. PETERSBURG, FL 33701 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: P
Name: BARRY, TRACEY A
Address: 111 2ND AVE. N.E., STE 900
City-St-Zip: ST. PETERSBURG, FL 33701

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: TRACEY A BARRY

PRES

02/14/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date