

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000053364

**FILED
Jan 11, 2011
Secretary of State**

Entity Name: MELISSA EMS INSURANCE AGENCY, INC.

Current Principal Place of Business:

2942 49TH ST., NORTH
SAINT PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

2942 49TH ST., NORTH
SAINT PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 27-3010666 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

EMS, MELISSA
2942 49TH ST NORTH
ST. PETERSBURG, FL 33710 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: D
Name: EMS, MELISSA M
Address: 5345 60TH AVE., N.
City-St-Zip: ST. PETERSBURG, FL 33709

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: MELISSA M. EMS

D

01/11/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date