

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000057163

FILED  
Mar 07, 2012  
Secretary of State

**Entity Name:** PITTMAN, OSCEOLA AND BOBYACK INS., INC.

**Current Principal Place of Business:**

659 AIRPORT ROAD NORTH  
NAPLES, FL 34104

**New Principal Place of Business:**

1185 IMMOKALEE RD.  
SUITE 110  
NAPLES, FL 34110

**Current Mailing Address:**

5282 GOLDEN GATE PKWY  
SUITE C  
NAPLES, FL 34116

**New Mailing Address:**

P.O. BOX 11509  
NAPLES, FL 34101

**FEI Number:** 27-3041138

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RESTREPO, JAIME  
659 AIRPORT ROAD NORTH  
NAPLES, FL 34104 US

**Name and Address of New Registered Agent:**

BOBYACK, ROBERT C  
1185 IMMOKALEE RD. SUITE 110  
NAPLES, FL 34110 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: ROBERT C. BOBYACK

03/07/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: BOBYACK, ROBERT C  
Address: 1185 IMMOKALEE RD. SUITE 110  
City-St-Zip: NAPLES, FL 34110

Title: CEO  
Name: OSCEOLA, O.B. JR.  
Address: 1185 IMMOKALEE RD. SUITE 110  
City-St-Zip: NAPLES, FL 34110

Title: VP  
Name: PITTMAN, CARL M  
Address: 1185 IMMOKALEE RD. SUITE 110  
City-St-Zip: NAPLES, FL 34110

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: ROBERT C. BOBYACK

PRES

03/07/2012

Electronic Signature of Signing Officer or Director

Date