

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000063448

FILED
Apr 29, 2012
Secretary of State

Entity Name: GRAHAM INSURANCE AND FINANCIAL SERVICES, INC.

Current Principal Place of Business:

15661 SHERIDAN ST., STE C-3
DAVIE, FL 33331

New Principal Place of Business:

16287 NW 15TH STREET
PEMBROKE PINES, FL 33028

Current Mailing Address:

P.O. BOX 821204
SOUTH FLORIDA, FL 33082

New Mailing Address:

FEI Number: 27-3188273

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHAM, STACEY S
15661 SHERIDAN ST., STE C-3
DAVIE, FL 33331 US

Name and Address of New Registered Agent:

GRAHAM, STACEY S
16287 NW 15TH STREET
PEMBROKE PINES, FL 33028 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: STACEY GRAHAM

04/29/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: GRAHAM, STACEY S
Address: P.O. BOX 821204
City-St-Zip: SOUTH FLORIDA, FL 33082

Title: VP
Name: GRAHAM, FLORENCE A
Address: P.O. BOX 821204
City-St-Zip: SOUTH FLORIDA, FL 33082

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: STACEY GRAHAM

PRES

04/29/2012

Electronic Signature of Signing Officer or Director

Date