2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2012
Secretary of State

DOCUMENT# P11000026709

Entity Name: STOCKBRIDGE INSURANCE GROUP INC

Current Principal Place of Business:

16972 NW 19TH STREET
PEMBROKE PINES, FL 33028

New Principal Place of Business:

4947 SW 183 AVE
MIRAMAR, FL 33029

Current Mailing Address:

16972 NW 19TH STREET
PEMBROKE PINES, FL 33028

New Mailing Address:

4947 SW 183 AVE
MIRAMAR, FL 33029

FEI Number: 45-0700581 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CUTLER, HAROLD
16972 NW 19 ST
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

CUTLER, HAROLD
4947 SW 183 AVE
MIRAMAR, FL 33029 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: HAROLD CUTLER 04/05/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: CUTLER, HAROLD
Address: 4947 SW 183 AVE
City-St-Zip: MIRAMAR, FL 33029

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: HAROLD CUTLER P 04/05/2012
Electronic Signature of Signing Officer or Director Date