

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000048265

Entity Name: VALENCIA INSURANCE INC

FILED
Apr 13, 2012
Secretary of State

Current Principal Place of Business:

508 SW PORT SAINT BLVD
PORT ST LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

508 SW PORT SAINT BLVD
PORT ST LUCIE, FL 34953

New Mailing Address:

FEI Number: 45-2383204

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSEPH, MARIA A
1067 SW SPRUCE ST
PALM CITY, FL 34990 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: JOSEPH, MARIA A
Address: 508 SW PORT ST LUCIE BLVD
City-St-Zip: PORT ST LUCIE, FL 34990

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: MARIA JOSEPH

P

04/13/2012

Electronic Signature of Signing Officer or Director

Date