

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000090761

FILED
Sep 15, 2012
Secretary of State

Entity Name: SOUTHALL CRAWFORD INSURANCE AGENCY, INC.

Current Principal Place of Business:

2725 N. POROTFINO ROAD
ST. AUGUSTINE, FL 32902

New Principal Place of Business:

Current Mailing Address:

2725 N. POROTFINO ROAD
ST. AUGUSTINE, FL 32902

New Mailing Address:

FEI Number: 45-3644409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOUTHALL, PAUL M
2725 N. POROTFINO ROAD
ST. AUGUSTINE, FL 32902 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: PNR
Name: SOUTHALL, PAUL M
Address: 2725 N. POROTFINO ROAD
City-St-Zip: ST. AUGUSTINE, FL 32902

Title: PNR
Name: CRAWFORD, MARC L
Address: 24237 MARSH LANDING PKY
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: MARC L CRAWFORD

PNR

09/15/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date