

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000051405

FILED
Apr 13, 2009
Secretary of State

Entity Name: FIDELITY INSURANCE MARKETING CO.

Current Principal Place of Business:

2450 HOLLYWOOD BLVD
700
HOLLYWOOD, FL 330206628

New Principal Place of Business:

1580 SAWGRASS CORPORATE PARKWAY
140
SUNRISE, FL 33323

Current Mailing Address:

2549 SANCTUARY DR
FORT LAUDERDALE, FL 33327

New Mailing Address:

FEI Number: 65-0425902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATLIN, ANDREW H
2450 HOLLYWOOD BLVD
700
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

KATLIN, ANDREW H
1580 SAWGRASS CORPORATE PARKWAY
140
SUNRISE, FL 33323 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: ANDREW H KATLIN

04/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDST () Delete
Name: KATLIN, ANDREW H
Address: 2450 HOLLYWOOD BLVD SUITE 700
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDST (X) Change () Addition
Name: KATLIN, ANDREW H
Address: 1580 SAWGRASS CORPORATE PARKWAY #140
City-St-Zip: SUNRISE, FL 33323

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANDREW H KATLIN

PRES

04/13/2009

Electronic Signature of Signing Officer or Director

Date