

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000035709

FILED  
Apr 05, 2010  
Secretary of State

**Entity Name:** PLESSINGER INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

5952 CHICKADEE DRIVE  
LAKE LAND, FL 33809

**New Principal Place of Business:**

**Current Mailing Address:**

5952 CHICKADEE DRIVE  
LAKE LAND, FL 33809

**New Mailing Address:**

FEI Number: 59-3240811

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PLESSINGER, KENNETH W  
5952 CHICKADEE DRIVE  
LAKE LAND, FL 33809 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: PLESSINGER, KENNETH W  
Address: 5952 CHICKADEE DRIVE  
City-St-Zip: LAKE LAND, FL 33809

Title: D  
Name: PLESSINGER, PATRICIA A  
Address: 5952 CHICKADEE DRIVE  
City-St-Zip: LAKE LAND, FL 33809

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: KENNETH W. PLESSINGER

D

04/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date