2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 09, 2008
Secretary of State

DOCUMENT# P94000068225

Entity Name: GULFSTREAM INSURANCE AGENCY, INC.

Current Principal Place of Business:

5833 JOHNSONS ST
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

Current Mailing Address:

5833 JOHNSON ST
HOLLYWOOD, FL 33021 US

New Mailing Address:

FEI Number: 59-3289557 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRANDSEN, JEAN S
5833 JOHNSON ST
HOLLYWOOD, FL 33021 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: PD ( ) Delete
Name: FRANDSEN, JEAN S
Address: 5833 JOHNSON ST
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP ( ) Change (X) Addition
Name: JENNIFER KISOR,
Address: 1928 LONGVIEW DR.
City-St-Zip: TALLAHASSEE, FL 32303 US

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: JEAN FRANDSEN PD 07/09/2008

Electronic Signature of Signing Officer or Director Date