2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000000353

293 ABELLO RD SE

PALM BAY, FL 32909

Address:

City-St-Zip:

Entity Name: ADVANCED INVESTMENT & INSURANCE, INC.

FILED Mar 16, 2009 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	E WASHINGTO	N ROAD				
SUITE 1 MELBOUN	NRE, FL 32935	US				
Current M	lailing Addres	s:	New Maili	New Mailing Address:		
2850 LAKE WASHINGTON ROAD						
SUITE 1 MELBOUN	NRE, FL 32935	US				
FEI Number:	: 59-3292434	FEI Number Applied For ()	FEI Number Not App	icable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
ROTH, RICHARD 293 ABELLO RD SE PALM BAY, FL 32909 US			4496 STR	ROTH, RICHARD 4496 STRATHMORE DRIVE LAKE WALES, FL 33859 US		
	named entity see of Florida.	ubmits this statement for the	purpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUR	RE:			03/16/2009		
	Electroni	c Signature of Registered Ag	ent		Date	
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	D () ROTH, RICHARI 293 ABELLO RE PALM BAY, FL) SE	Title: Name: Address: City-St-Zip:	ROTH, RICHA	IMORE DRIVE	
Title: Name: Address: City-St-Zip:	SVP () ROTH, CHRISTO 149 GIADIOIA R PALM BAY, FL	D NE	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	JVP () SINGLETARY, S 1183 WESLACO PALM BAY, FL	ST. SE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S () ROTH, SUSAN S	Delete	Title: Name:	S () ROTH, SUSAN	X) Change ()Addition N S	

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.

Address:

City-St-Zip:

SIGNATURE: CHRISTOPHER ROTH SVP 03/16/2009

4496 STRATHMORE DRIVE

LAKE WALES, FL 33859