

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000015604

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** BUSINESS INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

1035 S SEMORAN BLVD  
SUITE 1019  
WINTER PARK, FL 32792 US

**Current Mailing Address:**

PO BOX 2180  
GOLDENROD, FL 32733 US

**New Principal Place of Business:**

1035 S SEMORAN BLVD  
SUITE 1029  
WINTER PARK, FL 32792 US

**New Mailing Address:**

PO BOX 4429  
WINTER PARK, FL 32793 US

**FEI Number:** 59-3299872

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DULIN, RAMSEY  
201 E. PINE ST.  
SUITE 425  
ORLANDO, FL 32801 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:** P  
**Name:** GARCEAU, JOHN C  
**Address:** 8332 AMBER OAK DRIVE  
**City-St-Zip:** ORLANDO, FL 32817 US

**Title:** CEO  
**Name:** RANDALL, RICHARD J  
**Address:** 2074 SHAW LANE  
**City-St-Zip:** ORLANDO, FL 32814 US

**Title:** VP  
**Name:** RANDALL, GERALDINE A  
**Address:** 2074 SHAW LANE  
**City-St-Zip:** ORLANDO, FL 32814 US

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:** RICHARD J. RANDALL

CEO

04/11/2012

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

\_\_\_\_\_  
Date