

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000020946

FILED
Apr 03, 2012
Secretary of State

Entity Name: A TWIN PEAKS INSURANCE, INC.

Current Principal Place of Business:

3677 DAVIE BLVD
FT LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

3677 DAVIE BLVD
FT LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 65-0567116

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GROFF, SUSANNE A
812 SW 15TH STREET
FT LAUDERDALE, FL 33315 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: PRES
Name: GROFF, SUSANNE A
Address: 812 SW 15TH STREET
City-St-Zip: FT LAUDERDALE, FL 33315

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: SUSANNE GROFF

PRES

04/03/2012

Electronic Signature of Signing Officer or Director

Date