

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000063074

FILED  
Mar 16, 2011  
Secretary of State

**Entity Name:** THE INSURANCE ADVANTAGE, INC.

**Current Principal Place of Business:**

2813 S HIAWASSEE RD  
205  
ORLANDO, FL 32835 US

**New Principal Place of Business:**

**Current Mailing Address:**

2813 S. HIAWASSEE RD.  
205  
ORLANDO, FL 32835 US

**New Mailing Address:**

2813 S HIAWASSEE RD  
205  
ORLANDO, FL 32835 US

**FEI Number:** 59-3337247

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOZARTH, ROGER D  
9028 GREAT HERON CIRCLE  
ORLANDO, FL 32836 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  
Name: BOZARTH, ROGER D  
Address: 9028 GREAT HERON CIRCLE  
City-St-Zip: ORLANDO, FL 32836

Title: VSTD  
Name: BOZARTH, DONNA C  
Address: 9028 GREAT HERON CIRCLE  
City-St-Zip: ORLANDO, FL 32836

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: ROGER D. BOZARTH

PD

03/16/2011

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

\_\_\_\_\_  
Date