

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000074275

FILED
Feb 18, 2010
Secretary of State

Entity Name: BRISTOL WEST INSURANCE SERVICES, INC. OF FLORIDA

Current Principal Place of Business:

5701 STIRLING ROAD
ATTN:GREGORY HAMMOND, ESQ.
DAVIE, FL 333147431

New Principal Place of Business:

Current Mailing Address:

5701 STIRLING ROAD
ATTN:GREGORY HAMMOND, ESQ.
DAVIE, FL 333147431

New Mailing Address:

FEI Number: 65-0616769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: SADLER, ROBERT
Address: 5701 STIRLING ROAD
City-St-Zip: DAVIE, FL 33314

Title: SD
Name: HAMMOND, GREGORY
Address: 5701 STIRLING ROAD
City-St-Zip: DAVIE, FL 33314

Title: TD
Name: SADLER, ROBERT
Address: 5701 STIRLING ROAD
City-St-Zip: DAVIE, FL 33314

Title: V
Name: BURTCHE, DOUGLAS
Address: 5701 STIRLING RD
City-St-Zip: DAVIE, FL 33314

Title: V
Name: STEINMAN, EDWARD J
Address: 5701 STIRLING RD
City-St-Zip: DAVIE, FL 33314

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: LYN FRITTER

DOR

02/18/2010

Electronic Signature of Signing Officer or Director

Date