


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 21, 2008 8:00 am**  
**Secretary of State**

05-21-2008 90020 002 \*\*\*150.00

<b>DOCUMENT # P95000093773</b> 1. Entity Name <b>AEQUICAP INSURANCE AGENCY, INC.</b>					
Principal Place of Business <b>3000 W CYPRESS CREEK RD FT. LAUDERDALE, FL 33309</b>			Mailing Address <b>3000 W CYPRESS CREEK RD FT. LAUDERDALE, FL 33309</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>65-0626238</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>JONES, MATTHEW T ESQ` 3000 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b> Zip Code</span>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DCEO MORGAMAN, PHILIP E 3000 W CYPRESS CREEK RD FT. LAUDERDALE, FL 33309	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DCOO STEPHENSON, MARK 3000 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NICHOLS, NEAL 3251 WASHINGTON BLVD ARLINGTON, VA 22201	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MORGAMAN, JUSTIN 3000 W CYPRESS CREEK RD FORT LAUDERDALE, FL 33309	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DSVF GARDNER, DEBORAH S 3000 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV SPRUCE, WILLIAM D 3000 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Chairman D, CEO D, SVF, CFO, T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Matthew T. Jones</u> <span style="float: right;">Date: 3/16/08</span>					

# ATTACHMENT

AEQUICAP INSURANCE AGENCY, INC.  
ADDITIONAL DIRECTORS AND OFFICERS:

50005699  
#P95000093773

Title: P,COO  
Name: James E. Roberts  
Street Address: 3000 W. Cypress Creek Rd.  
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: V,S  
Name: Matthew T. Jones  
Street Address: 3000 W. Cypress Creek Rd.  
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: D  
Name: Charlie King  
Street Address: 3251 Washington Blvd.  
City-St-Zip: Arlington, VA 22201

Title: V  
Name: Marilyn Peterson  
Street Address: 3000 W. Cypress Creek Rd.  
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: V  
Name: Norm Baker  
Street Address: 3000 W. Cypress Creek Rd.  
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: SVP  
Name: Chris Parkinson  
Street Address: 3000 W. Cypress Creek Rd.  
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: V  
Name: Dawn Duxbury  
Street Address: 3000 W. Cypress Creek Rd.  
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: V  
Name: Brittany Rodgers  
Street Address: 3000 W. Cypress Creek Rd.  
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: SVP  
Name: Nicole Boodram  
Street Address: 3000 W. Cypress Creek Rd.  
City-St-Zip: Ft. Lauderdale, Florida 33309

ATTACHMENT

50005-699  
#P95000093773

Title: V  
Name: John Pecoraro  
Street Address: 3000 W. Cypress Creek Rd.  
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: V  
Name: Susan M. Plochoki  
Street Address: 3000 W. Cypress Creek Rd.  
City-St-Zip: Ft. Lauderdale, Florida 33309