2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000093773

Entity Name: AEQUICAP INSURANCE AGENCY, INC.

FILED Mar 25, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
3000 W CYPRESS CREEK RD FT. LAUDERDALE, FL 33309						
Current Mailing Address:			New Mailir	New Mailing Address:		
3000 W CYPRESS CREEK RD FT. LAUDERDALE, FL 33309						
FEI Number:	65-0626238	FEI Number Applied For ()	El Number Not Appli	cable () Co	ertificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and	Address of New	Registered Agent:	
JONES, MATTHEW T ESQ` 3000 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309 US						
The above in the State		submits this statement for the purpo	ose of changing it	s registered offic	e or registered agent, or both,	
SIGNATURE:						
		nic Signature of Registered Agent			Date	
Election Carr	npaign Financir	ng Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	MORGAMAN, 3000 W CYPF) Delete PHILIP E RESS CREEK RD IALE, FL 33309	Title: Name: Address: City-St-Zip:	() Ch	ange()Addition	
Title: Name: Address: City-St-Zip:	STEPHENSON 3000 W CYPF) Delete N, MARK RESS CREEK RD ALE, FL 33309	Title: Name: Address: City-St-Zip:	() Ch	ange () Addition	
Title: Name: Address: City-St-Zip:	D (NICHOLS, NE. 3251 WASHIN ARLINGTON, Y	IGTON BLVD	Title: Name: Address: City-St-Zip:	() Ch	ange () Addition	
Title: Name: Address: City-St-Zip:	MORGAMAN, 3000 W CYPF) Delete JUSTIN RESS CREEK RD RDALE, FL 33309	Title: Name: Address: City-St-Zip:	() Ch	ange () Addition	
Title: Name: Address: City-St-Zip:	GARDNER, DI 3000 W CYPF) Delete EBORAH S RESS CREEK RD ALE, FL 33309	Title: Name: Address: City-St-Zip:	() Ch	ange () Addition	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	PCOO () Ch ROBERTS, JAMES 3000 W CYPRESS FORT LAUDERDAL	CREEK RD	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MATTHEW T. JONES V 03/25/2009

AEQUICAP INSURANCE AGENCY, INC. ADDITIONAL DIRECTORS AND OFFICERS:

Document number: P95000093773

Title:

Name:

Street Address: City-St-Zip:

V.S

Matthew T. Jones

3000 W. Cypress Creek Rd. Ft. Lauderdale, Florida 33309

Title:

Name:

Street Address: City-St-Zip:

Charlie King

3251 Washington Blvd. Arlington, VĀ 22201

Title:

Name:

Street Address: City-St-Zip:

V

Marilyn Peterson

3000 W. Cypress Creek Rd. Ft. Landerdale, Florida 33309

Title:

Name:

Street Address: City-St-Zip:

Norm Baker

3000 W. Cypress Creek Rd. Ft. Lauderdale, Florida 33309

Title.

Name:

Street Address: City-St-Zip;

SVP

Chris Parkinson

3000 W. Cypress Creek Rd. Pt. Lauderdale, Florida 33309

Title:

Name:

Street Address:

City-St-Zip:

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Dawn Duxbury

3000 W. Cypress Creek Rd. Ft. Lauderdale, Florida 33309

Title:

Name:

Street Address: City-St-Zip:

V

Brittany Rodgers

3000 W. Cypress Creek Rd. Ft. Lauderdale, Florida 33309

Title:

SVP

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Name:

Nicole Boodram

Street Address: City-St-Zip:

3000 W. Cypress Creek Rd. Ft. Lauderdale, Florida 33309

Fitle:

Name:

Street Address:

John Pecoraro.

City-St-Zip:

3000 W. Cypress Creek Rd. Ft. Lauderdale, Florida 33309

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Title: Name: Street Address: City-St-Zip:

Title: Name: Street Address: City-St-Zip: V Susan M. Płochoki 3000 W. Cypress Creek Rd. 3000 W. Cypress Creek Rd. 14. Lauderdale, Florida 33309

V Bradford St. Pierre 3000 W. Cypress Creek Rd. 14. Landerdale, Plorida 33300