

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 12, 2011
Secretary of State

Entity Name: LAKE OKEECHOBEE INSURANCE, INCORPORATED

Current Principal Place of Business:

1500 ST. RD. 70 EAST
A
OKEECHOBEE, FL 34972

New Principal Place of Business:

Current Mailing Address:

1500 ST. RD. 70 EAST
A
OKEECHOBEE, FL 34972

New Mailing Address:

FEI Number: 65-0623311

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIECK, PAUL A
1500 ST. RD. 70 EAST
A
OKEECHOBEE, FL 34972 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: RIECK, PAUL A
Address: 1300 SW 86TH AVE
City-St-Zip: OKEECHOBEE, FL 34974

Title: VSTD
Name: RIECK, DOROTHY J
Address: 1300 SW 86TH AVE
City-St-Zip: OKEECHOBEE, FL 34974

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: PAUL A RIECK

PRES

04/12/2011

Electronic Signature of Signing Officer or Director

Date