

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000026619

Entity Name: ACADEMY INSURANCE AGENCY, INC.

FILED
Jun 30, 2009
Secretary of State

Current Principal Place of Business:

3518 53RD AVE W
BRADENTON, FL 34210

New Principal Place of Business:

7600 CORTEZ RD. W.
BRADENTON, FL 34210

Current Mailing Address:

3518 53RD AVE W
BRADENTON, FL 34210

New Mailing Address:

7600 CORTEZ RD. W.
BRADENTON, FL 34210

FEI Number: 65-0652918

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUSH, WILLIAM G
3618 53RD AVE W
BRADENTON, FL 34210 US

Name and Address of New Registered Agent:

BUSH, WILLIAM G PDS
7600 CORTEZ RD. W
BRADENTON, FL 34210 US

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: WILLIAM G. BUSH

06/30/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDS () Delete
Name: BUSH, WILLIAM G
Address: 4761 LIMBERLOST DR
City-St-Zip: MANLIUS, NY 13041

Title: CDT () Delete
Name: BUICKO, DAVID
Address: 695 RUTTERDAM INDUSTRIAL PARK
City-St-Zip: SCHENECTADY, NY 12306

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CDT (X) Change () Addition
Name: BUICKO, DAVID
Address: 695 RUTTERDAM INDUSTRIAL PARK
City-St-Zip: SCHENECTADY, NY 12306

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: WILLIAM G. BUSH

PDS

06/30/2009

Electronic Signature of Signing Officer or Director

Date