

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000067798

FILED
Nov 20, 2008
Secretary of State

Entity Name: THE INSURANCE ASSOCIATES OF THE PALM BEACHES, INC.

Current Principal Place of Business:

749 US HIGHWAY ONE
STE 206
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

4521 PGA BLVD
PMB 410
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 65-0698705

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARVIN, EZRA G
PMB 410
4521 PGA BLVD
PALM BEACH GARDENS, FL 33418 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: EZRA G. HARVIN

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: P () Delete
Name: HARVIN, EZRA G
Address: 749 US HIGHWAY ONE STE 206
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: EZRA G. HARVIN

Electronic Signature of Signing Officer or Director

PRES

11/20/2008

Date