

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000082502

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** TGI INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

4124 DAVIE ROAD  
DAVIE, FL 33314 US

**New Principal Place of Business:**

**Current Mailing Address:**

2113 MAJESTIC POPLAR DR  
WAXHAW, NC 28173 US

**New Mailing Address:**

4124 DAVIE ROAD  
DAVIE, FL 33314 US

**FEI Number:** 65-0710016

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TESTA, JOHN E  
4124 DAVIE RD  
DAVIE, FL 33314 US

**Name and Address of New Registered Agent:**

SORTO, ELVIA  
4124 DAVIE RD  
DAVIE, FL 33314 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: ELVIA SORTO

04/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: TESTA, JOHN E  
Address: 2113 MAJESTIC POPLAR DR  
City-St-Zip: WAXHAW, NC 28173 US

Title: P  
Name: SORTO, ELVIA  
Address: 4124 SW 64TH AVE  
City-St-Zip: DAVIE, FL 33314 US

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: JOHN TESTA

VP

04/23/2012

Electronic Signature of Signing Officer or Director

Date