

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000000597

FILED  
Aug 21, 2009  
Secretary of State

Entity Name: TIM HEWETT INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

4400 W SAMPLE RD, SUITE 130  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

4400 W SAMPLE RD, SUITE 130  
COCONUT CREEK, FL 33073

**New Mailing Address:**

FEI Number: 65-0726957

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FILINGS, INC.  
3732 NW 16TH ST  
FT LAUDERDALE, FL 33311 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

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: D ( ) Delete  
Name: HEWETT, TIM  
Address: 5940 W. SAMPLE ROAD, UNIT 305  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: O ( ) Delete  
Name: HEWETT, MIA I  
Address: 5940 W. SAMPLE ROAD, UNIT 305  
City-St-Zip: CORAL SPRINGS, FL 33067

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: TIM HEWETT

D

08/21/2009

Electronic Signature of Signing Officer or Director

Date