2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2011
Secretary of State

DOCUMENT# P97000006916

Entity Name: CRAIG SAVANT INSURANCE AGENCY, INC.

Current Principal Place of Business:

959 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

New Principal Place of Business:

959 N. UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

Current Mailing Address:

959 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

New Mailing Address:

959 N. UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

FEI Number: 65-0776466 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAVANT, CRAIG R
959 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

SAVANT, CRAIG R
959 N. UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 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: _____ 02/18/2011
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: SAVANT, CRAIG R
Address: 959 N. UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VP
Name: SAVANT, LISA H
Address: 959 N. UNIVERSITY DR
City-St-Zip: CORAL SPRINGS, FL 33071

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: CRAIG SAVANT PRES 02/18/2011
Electronic Signature of Signing Officer or Director — Date