2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P97000011803

Entity Name: BOBBY PITTMAN INSURANCE AGENCY, INC.

Current Principal Place of Business:

27400 RIVERVIEW CENTER BLVD - STE. 2
BONITA SPRINGS, FL 34134

New Principal Place of Business:

27831 S. TAMIAMII TRAIL
BONITA SPRINGS, FL 34135

Current Mailing Address:

27400 RIVERVIEW CENTER BLVD - STE. 2
BONITA SPRINGS, FL 34134

New Mailing Address:

P.O.BOX 2287
BONITA SPRINGS, FL 34133

FEI Number: 59-3436313 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAMB, JEFFREY R
868 106TH AVE N
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

TAX ACCOUNTING & FINANCIAL ASS.
809 WALKERBILT RD.
NAPLES, FL 34110 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: B.COTTRELL 04/30/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: PITTMAN, BOBBY
Address: 9255 THE LANE
City-St-Zip: NAPLES, FL 34109

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: BOBBY PITTMAN DP 04/30/2008
Electronic Signature of Signing Officer or Director Date