

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000011803

**FILED**  
**May 14, 2010**  
**Secretary of State**

**Entity Name:** BOBBY PITTMAN INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

27831 S. TAMIAMI TRAIL  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 2287  
BONITA SPRINGS, FL 34133

**New Mailing Address:**

**FEI Number:** 59-3436313

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DANNY SHUM,C.P.A.  
1921 N.W. 150TH AVE.  
SUITE 104  
PEMBROKE PINES, FL 33028 US

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

DANNY SHUM,C.P.A.  
5220 S. UNIVERSITY DR. .  
SUITE 207  
DAVIE, FL 33328 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:

Electronic Signature of Registered Agent

05/14/2010

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

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: BOBBY PITTMAN

PRES

05/14/2010

Electronic Signature of Signing Officer or Director

Date