

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000015622

Entity Name: DILLON NOLAN INSURANCE, INC

FILED  
Apr 28, 2011  
Secretary of State

**Current Principal Place of Business:**

11400 47TH AVE. N.  
ST. PETERSBURG, FL 33708 US

**New Principal Place of Business:**

**Current Mailing Address:**

11400 47TH AVE. N.  
ST. PETERSBURG, FL 33708 US

**New Mailing Address:**

FEI Number: 59-3446159

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DILLON, STEPHANIE  
11400 47TH AVE. N.  
ST. PETERSBURG, FL 33708 US

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

NOLAN, JOHN D  
11400 47TH AVE. N.  
ST. PETERSBURG, FL 33708 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: JOHN D. NOLAN

04/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: NOLAN, JOHN D  
Address: 11400 47TH AVE. N.  
City-St-Zip: ST. PETERSBURG, FL 33708 US

Title: VP  
Name: DILLON, STEPHANIE L  
Address: 11400 47TH AVE. NORTH  
City-St-Zip: ST. PETERSBURG, FL 33708

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 D. NOLAN

PRES

04/28/2011

Electronic Signature of Signing Officer or Director

Date