

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000061386

FILED  
Jan 10, 2012  
Secretary of State

**Entity Name:** BROKER INSURANCE MARKETING, INC.

**Current Principal Place of Business:**

124 12TH ST.  
BELLEAIR BEACH, FL 33786 US

**New Principal Place of Business:**

**Current Mailing Address:**

124 12TH ST.  
BELLEAIR BEACH, FL 33786 US

**New Mailing Address:**

**FEI Number:** 59-3483874

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VINCENT, MUNNO  
124 12TH STREET  
BELLEAIR BEACH, FL 33786 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MUNNO, VINCENT  
Address: 124 12TH ST.  
City-St-Zip: BELLEAIR BEACH, FL 33786

Title: VP  
Name: SIBSON, JAMES W  
Address: 2963 GULF TO BAY BLVD #330  
City-St-Zip: CLEARWATER, FL 33759

Title: VP  
Name: POLLAK, NEIL A  
Address: 2963 GULF TO BAY BLVD #330  
City-St-Zip: CLEARWATER, FL 33759

Title: VP  
Name: MEDIN, NATHAN  
Address: 2963 GULF TO BAY BLVD #330  
City-St-Zip: CLEARWATER, FL 33759

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: VINCENT MUNNO

PRES

01/10/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date