2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000102232

Entity Name: DAVID BERGEN INSURANCE AGENCY, INC.

FILED Sep 13, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3619 LITHIA PINECREST RD VALRICO, FL 33596

Current Mailing Address: New Mailing Address:

3619 LITHIA PINECREST RD VALRICO, FL 33596

FEI Number: 59-3485090 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BERGEN, DAVID

3619 LITHIA PINECREST RD

VALRICO, FL 33596 US

BERGEN, MELODY

3619 LITHIA PINECREST RD

VALRICO, FL 33596 US

VALRICO, FL 33596 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: MELODY BERGEN 09/13/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PSD

in the State of Florida.

Name: BERGEN, MELODY
Address: 3619 LITHIA PINECREST RD
City-St-Zip: VALRICO, FL 33596

Title: VTD

Name: BERGEN, MELODY

Address: 3619 LITHIA PINECREST RD City-St-Zip: VALRICO, FL 33596

Title: TREA

Name: BERGEN, MELODY

Address: 3619 LITHIA PINECREST ROA

City-St-Zip: VALRICO, FL 33596

Title: SECR

Name: BERGEN, MELODY

Address: 3619 LITHIA PINECREST ROAD

City-St-Zip: VALRICO, FL 33596

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: MELODY BERGEN PRES 09/13/2011