2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2011
Secretary of State

DOCUMENT# P98000107671

Entity Name: FLANIGAN & ASSOCIATES INSURANCE, INC.

Current Principal Place of Business:

11406 N. DALE MABRY HWY.
SUITE E
TAMPA, FL 33618

New Principal Place of Business:

11012 4TH ST N
ST PETERSBURG, FL 33716

Current Mailing Address:

11406 N. DALE MABRY HWY.
SUITE E
TAMPA, FL 33618

New Mailing Address:

11012 4TH ST N
ST PETERSBURG, FL 33716

FEI Number: 59-3547618 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLANIGAN, LYNDA A
2913 W FAIR OAKS AVE
TAMPA, FL 33611 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: PST
Name: FLANIGAN, LYNDA A
Address: 2913 W FAIR OAKS AVE
City-St-Zip: TAMPA, FL 33611

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: LYNDA FLANIGAN PRES 01/24/2011

Electronic Signature of Signing Officer or Director — Date