

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000053126

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** EXCALIBUR INSURANCE AND INVESTMENTS, INC.

**Current Principal Place of Business:**

2131 N.W. 40TH TERR.  
STE D  
GAINESVILLE, FL 32605

**New Principal Place of Business:**

10348 SW 32ND AVE.  
GAINESVILLE, FL 32608

**Current Mailing Address:**

2131 N.W. 40TH TERR.  
STE D  
GAINESVILLE, FL 32605

**New Mailing Address:**

2725 SW 91ST ST.  
SUITE 110 - PMB201  
GAINESVILLE, FL 32608

**FEI Number:** 59-3579366

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DISTEFANO, JOHN  
2131 N.W. 40TH TERR  
STE D  
GAINESVILLE, FL 32605 US

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

DISTEFANO, JOHN  
10348 SW 32ND AVE  
GAINESVILLE, FL 32608 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 DISTEFANO

04/30/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DISTEFANO, JOHN  
Address: 2131 N.W. 40TH TERR., #D  
City-St-Zip: GAINESVILLE, FL 32605

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 DISTEFANO

P

04/30/2011

Electronic Signature of Signing Officer or Director

Date