

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000075113

Entity Name: C.A.R. INSURANCE, INC.

FILED
Mar 10, 2011
Secretary of State

Current Principal Place of Business:

17 OLD KINGS ROAD, NORTH
SUITE R
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

21 OLD KINGS ROAD, NORTH
SUITE B102
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 59-3594193

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONSER, ANNA G
21 OLD KINGS ROAD, NORTH
SUITE B102
PALM COAST, FL 32137 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: PSD
Name: CONSER, ROBERT W
Address: 21 OLD KINGS ROAD, NORTH, SUITE B102
City-St-Zip: PALM COAST, FL 32137

Title: VTD
Name: CONSER, ANNA G
Address: 21 OLD KINGS ROAD, NORTH, SUITE B102
City-St-Zip: PALM COAST, FL 32137

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: ANNA G CONSER

VTD

03/10/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date