2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000105623

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

3001 MEACHAM BLVD., STE. 200

() Delete

3001 MEACHAM BLVD., STE, 200

FORT WORTH, TX 76137

GAMBERO, DARRELL J

FORT WORTH, TX 76137

Entity Name: CITIEINANCIAL INSLIDANCE AGENCY OF FLORIDA INC

FILED Apr 01, 2008 Secretary of State

LINKY NAME: CITIF INANCIAL INSURANCE AGENCY OF FLORIDA, INC.						
Current Principal Place of Business:			New Prir	New Principal Place of Business:		
3001 MEACHAM BLVD SUITE 200 FORT WORTH, TX 76137			SUITE 10	3001 MEACHAM BLVD SUITE 100 FORT WORTH, TX 76137		
Current Mailing Address:			New Mai	New Mailing Address:		
3001 MEACHAM BLVD SUITE 200 FORT WORTH, TX 76137			SUITE 10	3001 MEACHAM BLVD SUITE 100 FORT WORTH, TX 76137		
FEI Number:	75-2856468	FEI Number Applied For ()	FEI Number Not Ap	plicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
TARPON S	(SHIRE LANE, SPRINGS, FL	34688 US	urnose of changing	ı ite register <i>e</i>	ed office or registered agent, or both,	
	of Florida.	submits this statement for the po	irpose or changing	i its registere	ed office of registered agent, of both,	
SIGNATUR	RE:					
Electronic Signature of Registered Agent				Date		
Election Can	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	AGNELLO, RÌC	/I BLVD., STE. 200	Title: Name: Address: City-St-Zip:		(X) Change () Addition DAVA S CHAM BLVD., STE. 100 RTH, TX 76137	
Title: Name: Address: City-St-Zip:	LIEHMAN, GRE	/I BLVD., STE. 200	Title: Name: Address: City-St-Zip:		(X) Change()Addition GREGG CHAM BLVD., STE. 100 RTH, TX 76137	
Title: Name: Address: City-St-Zip:	LARKIN, PAULA	/I BLVD., STE. 200	Title: Name: Address: City-St-Zip:		(X) Change () Addition AULA D CHAM BLVD., STE. 100 RTH, TX 76137	
Title: Name:	D ()	Delete IA E	Title: Name:	D DAVID, PA ⁻	(X) Change()Addition TRICIA E	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

3001 MEACHAM BLVD., STE. 100

3001 MEACHAM BLVD., SUITE 100

(X) Change () Addition

FORT WORTH, TX 76137

FORT WORTH, TX 76137

MADISON, GUY L

SIGNATURE: GREGG H. LEHMAN S 04/01/2008