

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V16202

FILED
Apr 10, 2007
Secretary of State

Entity Name: CRAIG DUNCAN INSURANCE AGENCY, INC.

Current Principal Place of Business:

2745 STATE ROAD 580
SUITE 101
CLEARWATER, FL 33761 US

New Principal Place of Business:

Current Mailing Address:

2745 STATE ROAD 580
SUITE 101
CLEARWATER, FL 33761 US

New Mailing Address:

FEI Number: 59-3121599

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNCAN, CRAIG K.
2745 STATE ROAD 580
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

DUNCAN, CRAIG K.
2745 STATE ROAD 580
SUITE 101
CLEARWATER, FL 33761 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:

04/10/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUNCAN, CRAIG K
Address: 3428 ASPEN TRAIL
City-St-Zip: CLEARWATER, FL 33761

Title: V () Delete
Name: DUNCAN, B.J.
Address: 3171 SAN PEDRO ST.
City-St-Zip: CLEARWATER, FL 33759

Title: ST () Delete
Name: DUNCAN, BARBARA L
Address: 3428 ASPEN TRAIL
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: BARBARA L. DUNCAN

ST

04/10/2007

Electronic Signature of Signing Officer or Director

Date