2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# V17290

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

Current Principal Place of Business:

1195 NORTH MILITARY TRAIL
SUITE 1-B
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

1195 NORTH MILITARY TRAIL
SUITE 1-B
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 65-0319565 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CUSENZA, ROBERT
1195 NORTH MILITARY TRAIL SUITE 1-B
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

CUSENZA, ROBERT
1195 NORTH MILITARY TRAIL SUITE 1-B
WEST PALM BEACH, FL 33409 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: ROBERT CUSENZA 04/28/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVD ( ) Delete
Name: CUSENZA, ROBERT,
Address: 2429 GABRIEL LANE
City-St-Zip: W. PALM BEACH, FL

Title: STD ( ) Delete
Name: CUSENZA, MARY ANN,
Address: 2429 GABRIEL LANE
City-St-Zip: W. PALM BEACH, FL

Title: D (X) Delete
Name: CUSENZA, CASPER,
Address: 2429 GABRIEL LANE
City-St-Zip: W. PALM BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD (X) Change ( ) Addition
Name: CUSENZA, ROBERT
Address: 15779 CYPRESS CHASE LANE
City-St-Zip: WELLINGTON, FL 33414

Title: STD (X) Change ( ) Addition
Name: CUSENZA, ROBERT
Address: 15779 CYPRESS CHASE LANE
City-St-Zip: WELLINGTON, FL 33414

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

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.

SIGNATURE: ROBERT CUSENZA D 04/28/2008
Electronic Signature of Signing Officer or Director Date