

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V20781

FILED  
Mar 26, 2009  
Secretary of State

Entity Name: MARIE BUCHHOLZ INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

10661 WILES RD  
CORAL SPRINGS, FL 33076

**New Principal Place of Business:**

**Current Mailing Address:**

10661 WILES RD  
CORAL SPRINGS, FL 33076

**New Mailing Address:**

FEI Number: 65-0318071

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUCHHOLZ, MARIE  
10661 WILES ROAD  
CORAL SPRINGS, FL 33076 US

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

BUCHHOLZ, MARIE-ANNE PRESIDE  
10661 WILES ROAD  
CORAL SPRINGS, FL 33076 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: MARIE-ANNE BUCHHOLZ

03/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: BUCHHOLZ, MARIE PRES  
Address: 10661 WILES ROAD  
City-St-Zip: CORAL SPRINGS, FL 33076

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: MARIE-ANNE BUCHHOLZ

PRES

03/26/2009

Electronic Signature of Signing Officer or Director

Date