

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V47814

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Entity Name:** FIRST INSURANCE CONSULTANTS OF BOCA RATON, INC.

**Current Principal Place of Business:**

40 SE 5TH ST  
SUITE 501  
BOCA RATON, FL 33432

**New Principal Place of Business:**

40 SE 5TH STREET  
SUITE 501  
BOCA RATON, FL 33432 US

**Current Mailing Address:**

40 SE 5TH STREET  
SUITE 501 BOX 5004  
BOCA RATON, FL 33431 US

**New Mailing Address:**

40 SE 5TH STREET  
SUITE 501  
BOCA RATON, FL 33432 US

**FEI Number:** 65-0378347

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WALDMAN, GLENN  
40 SE 5TH ST  
SUITE 501  
BOCA RATON, FL 33432 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WALDMAN, GLENN  
Address: 40 SE 5TH ST, STE 501  
City-St-Zip: BOCA RATON, FL

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: GLENN WALDMAN

PRES

02/18/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date