

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006145

FILED  
Feb 25, 2011  
Secretary of State

**Entity Name:** BRANDS INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

6449 ALLEN ROAD  
WEST CHESTER, OH 45069

**New Principal Place of Business:**

**Current Mailing Address:**

6449 ALLEN ROAD  
WEST CHESTER, OH 45069

**New Mailing Address:**

FEI Number: 31-1403760

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REGISTERED AGENTS LEGAL SERVICES, INC.  
155 OFFICE PLAZA DR.  
SUITE A  
TALLAHASSEE, FL 32301 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BRANDS, ALISON M  
Address: 2925 ALPINE TERRACE  
City-St-Zip: CINCINNATI, OH 45208

Title: T  
Name: BRANDS, MATTHEW J  
Address: 4236 W CHASE RUN  
City-St-Zip: LIBERTY TOWNSHIP, OH 45011

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: ALISON M. BRANDS

OWNE

02/25/2011

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

\_\_\_\_\_ Date