#### **2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F88855

Entity Name: BAKER-HARRIS INSURANCE AGENCY, INC.

FILED
Jan 09, 2018
Secretary of State
CC1181040874

# **Current Principal Place of Business:**

1634-2 METROPOLITAN BLVD. TALLAHASSEE, FL 32308

# **Current Mailing Address:**

PO BOX 3785

TALLAHASSEE, FL 32315

FEI Number: 59-1958106 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

HARRIS, DREXAL N 1634-2 METROPOLITAN BLVD. TALLAHASSEE, FL 32308 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title PD Title STD

Name HARRIS, DREXAL N Name HARRIS, JEANNE H

Address 2527 BETTON WOODS DR Address 2527 BETTON WOODS DR

City-State-Zip: TALLAHASSEE FL 32308 City-State-Zip: TALLAHASSEE FL 32308

Title VP

Name HARRIS, HUNTER H
Address 4083 FORSYTHE WAY
City-State-Zip: TALLAHASSEE FL 32309

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: JEANNE H HARRIS

SECRETARY/TREASURER 01/09/2018

Electronic Signature of Signing Officer/Director Detail

Date