2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2014
Secretary of State
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Entity Name: MERRILL-HANCOCK & TURNER INSURANCE, INC.

Current Principal Place of Business:

1301 ST JOHNS AVENUE
PALATKA, FL 32177

Current Mailing Address:

POST OFFICE BOX 460
PALATKA, FL 32178

FEI Number: 20-3486267

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TURNER, LAURA L
455 EAST END ROAD
SAN MATEO, FL 32187 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	PSTD	Title	D, VP
Name	TURNER, LAURA L	Name	LAURIE, JULIETTE A
Address	455 EAST END ROAD	Address	505 MAGNOLIA AVE
City-State-Zip:	SAN MATEO FL 32187	City-State-Zip:	CRESCENT CITY FL 32112
Title	DIRECTOR	Title	DIRECTOR
Name	LAURIE, WILLIAM J	Name	LAURIE, ROBERT M
Address	505 MAGNOLIA AVE	Address	455 EAST END RD
City-State-Zip:	CRESCENT CITY FL 32112	City-State-Zip:	SAN MATEO FL 32187

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: LAURA L TURNER PRESIDENT 01/10/2014

Electronic Signature of Signing Officer/Director Detail — Date