


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 22, 2005 8:00 am**  
**Secretary of State**

07-22-2005 90021 029 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                          |                                 |                                                                                                                                                                                                                                                                          |                                                                                                             |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|---------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # 324071</b><br>1. Entity Name<br><b>JOHN P. HUTH INSURANCE, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                          |                                 |                                                                                                                                                                                                                                                                          |                            |  |
| Principal Place of Business<br><b>7019 18TH AVE DR W</b><br><b>BRADENTON, FL 34209</b> <b>US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                          |                                 | Mailing Address<br><b>7019 18TH AVE DR NW</b><br><b>BRADENTON, FL 34209</b> <b>US</b>                                                                                                                                                                                    |                                                                                                             |  |
| 2. Principal Place of Business<br><b>1819-71ST STREET, N.W.</b><br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                          |                                 | 3. Mailing Address<br><b>1819-71ST STREET, N.W.</b><br>Suite, Apt. #, etc.                                                                                                                                                                                               |                                                                                                             |  |
| City & State<br><b>BRADENTON, FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                          |                                 | City & State<br><b>BRADENTON, FL</b>                                                                                                                                                                                                                                     |                                                                                                             |  |
| Zip<br><b>34209</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                          | Country                         |                                                                                                                                                                                                                                                                          | 4. FEI Number<br><b>59-1201732</b>                                                                          |  |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                          |                                 |                                                                                                                                                                                                                                                                          | Applied For<br>Not Applicable                                                                               |  |
| 6. Name and Address of Current Registered Agent<br><br><b>HUTH, JOHN P</b><br><b>7019 18TH AVE DR W</b><br><b>BRADENTON, FL 34209</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                          |                                 | 7. Name and Address of New Registered Agent<br><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br><b>1819-71ST STREET, NW</b><br>City<br><div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div> |                                                                                                             |  |
| 8. 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. I am familiar with, and accept the obligations of registered agent.<br><br>SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>                                                                                                                                                                                                                             |                                                                                          |                                 |                                                                                                                                                                                                                                                                          |                                                                                                             |  |
| <div style="border: 1px solid black; padding: 2px; text-align: center;"> <b>PAID NOW!!! FEE IS \$150.00</b><br/> <b>Due by September 1, 2005</b> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                          |                                 | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b><br>In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.                                                   |                                                                                                             |  |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                          |                                 | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                                                                                                                                                    |                                                                                                             |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>P</b><br><b>HUTH, JOHN P</b><br><b>7019 18TH AVE DR NW</b><br><b>BRADENTON, FL</b>    | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                           | <b>1819-71ST STREET, NW</b><br><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>V</b><br><b>HUTH, WILLIAM H. C.</b><br><b>7215-6TH AVE NW</b><br><b>BRADENTON, FL</b> | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                           | <b>415-51ST STREET, NW</b><br><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>S</b><br><b>HUTH, BETTY LOU</b><br><b>7019 18TH AVE DR NW</b><br><b>BRADENTON, FL</b> | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                           | <b>1819-71ST STREET, NW</b><br><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                          | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                           |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                          | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                           |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                          | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                           |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |                                                                                          |                                 |                                                                                                                                                                                                                                                                          |                                                                                                             |  |
| <b>SIGNATURE: <u>John Huth</u></b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                          |                                 | <b>941 794-8202</b><br><b>X 7-18-05</b> <b>X</b><br><small>Date Daytime Phone #</small>                                                                                                                                                                                  |                                                                                                             |  |

**50057076**



07132005    Chg-P    CR2E034 (10/03)

ATTACHMENT

50057076  
#324071

7019 - 18th Ave DR NW  
WRONG ADDRESS - I  
Never got forms.  
correct address

John Huth  
1819 71st St. NW  
Bradenton, FL 34209

---