

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 351057

FILED
Apr 05, 2011
Secretary of State

Entity Name: JOHN M. HUNNICUTT INSURANCE & INVESTMENTS, INC.

Current Principal Place of Business:

29B MIRACLE STRIP PARKWAY S W
FT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 906
FT WALTON BEACH, FL 32549

New Mailing Address:

FEI Number: 59-1267788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNNICUTT, JOHN M
29B MIRACLE STRIP PKWY SW
FORT WALTON BEACH, FL 32548 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: PD
Name: HUNNICUTT, JOHN M
Address: 29B MIRACLE STRIP PKWY SW
City-St-Zip: FT WALTON BEACH, FL 32548

Title: VP
Name: ATWELL, CHRISTINA L
Address: 29B MIRACLE STRIP PKWY SW
City-St-Zip: FT WALTON BEACH, FL 32548

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: JOHN M. HUNNICUTT

PD

04/05/2011

Electronic Signature of Signing Officer or Director

Date