

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 370404

**FILED
May 22, 2006
Secretary of State**

Entity Name: HSH/HUCKLEBERRY, SIBLEY & HARVEY INSURANCE AND BONDS, INC.

Current Principal Place of Business:

1020 N. ORLANDO AVE.
SUITE 200
MAITLAND, FL 32751 US

New Principal Place of Business:

Current Mailing Address:

1020 N. ORLANDO AVE.
SUITE 200
MAITLAND, FL 32751 US

New Mailing Address:

FEI Number: 59-1307966 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JAMES, TERRY L
438 E GRANT STREET
ORLANDO, FL 32806 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: TD (X) Delete
Name: BREEN, JAMES H.,
Address: 3396 STERLING RIDGE CT
City-St-Zip: LONGWOOD, FL 32779

Title: PD () Delete
Name: SIBLEY, B. CRAIG
Address: 2035 KING ARTHUR CIRCLE
City-St-Zip: MAITLAND, FL 32751

Title: SD () Delete
Name: JAMES, TERRY L
Address: 438 E GRANT STREET
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PTD (X) Change () Addition
Name: SIBLEY, B. CRAIG
Address: 2035 KING ARTHUR CIRCLE
City-St-Zip: MAITLAND, FL 32751

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CRAIG B. SIBLEY

PTD

05/22/2006

Electronic Signature of Signing Officer or Director

_____ Date