

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 488127

**FILED**  
**Jan 17, 2013**  
**Secretary of State**

**Entity Name:** JOHN DOUGLAS INSURANCE AGENCY, INCORPORATED

**Current Principal Place of Business:**

2217 ST. ANDREWS BLVD.  
PANAMA CITY, FL 32405

**New Principal Place of Business:**

**Current Mailing Address:**

2217 ST. ANDREWS BLVD.  
PANAMA CITY, FL 32405

**New Mailing Address:**

**FEI Number:** 59-1646425

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MESSER, JOHN DOUGLAS S  
2217 ST. ANDREWS BLVD.  
PANAMA CITY, FL 32405 US

**Name and Address of New Registered Agent:**

MESSER, JOHN D SR.  
2217 ST. ANDREWS BLVD.  
PANAMA CITY, FL 32405 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: JOHN D MESSER, SR

01/17/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MESSER, JOHN D SR.  
Address: 2217 ST. ANDREWS BLVD.  
City-St-Zip: PANAMA CITY, FL 32405

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 D MESSER, SR.

PRES

01/17/2013

Electronic Signature of Signing Officer or Director

Date