

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 519791

FILED
Feb 20, 2006
Secretary of State

Entity Name: HUGH COTTON INSURANCE, INC.

Current Principal Place of Business:

2315 CURRY FORD ROAD
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

2315 CURRY FORD ROAD
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 59-1707946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COTTON, HUGH
2315 CURRY FORD ROAD
ORLANDO, FL 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COTTON, THOMAS M
Address: 1107 ARUBA DR
City-St-Zip: ORLANDO, FL 32806

Title: SD () Delete
Name: COTTON, JENNIE S.,
Address: 2431 VINE STREET
City-St-Zip: ORLANDO, FL

Title: V () Delete
Name: PLATT, IRMA
Address: 100 S 5TH ST
City-St-Zip: ORLANDO, FL 32833

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: THOMAS M COTTON

PD

02/20/2006

Electronic Signature of Signing Officer or Director

Date