FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 28 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **578470** **(7)**

1. Corporation Name

GARROTT-CARROLL INSURANCE AGENCY, INC.

Principal Place of Business	Mailing Address
712 53RD AVE E. BRADENTON FL 34203	712 53RD AVE E. BRADENTON FL 34203

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/13/1978
3a. Date of Last Report: 04/26/1994

2. Principal Place of Business
21: 4303 1ST ST. E.
22 Suite, Apt. #, etc: 312
23 City & State: BRADENTON, FLA
24 Zip: 34208-4448 Country: MANATEE

2a. Mailing Address
26: Same
27 Suite, Apt. #, etc: Same
28 City & State: Same
29 Zip: Same Country: 30 Same

4. FEI Number: 59-1837543 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GARROTT, GARY M.
712 53RD AVE E.
BRADENTON, FL C 34203

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes

SIGNATURE: G. Michael Garrott, Pres. G. Michael Garrott, Pres. 4/25/95
(Signature, typed or printed name of registered agent and the date) (NOTE: Registered Agent's signature required) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1 1 TITLE	☒ Change ☐ Addition
NAME	GARROTT, GARY M.	1 2 NAME	
STREET ADDRESS	712 53RD AVE. E.	1 3 STREET ADDRESS	4303 1ST ST. E. #312
CITY ST ZIP	BRADENTON FL	1 4 CITY ST ZIP	BRADENTON, FLA 34208-4448
TITLE	ST	2 1 TITLE	☒ Change ☐ Addition
NAME	GARROTT, SHARON	2 2 NAME	
STREET ADDRESS	712 53RD AVE E	2 3 STREET ADDRESS	4303 1ST ST. E. #312
CITY ST ZIP	BRADENTON FL	2 4 CITY ST ZIP	BRADENTON, FLA 34208-4448
TITLE		3 1 TITLE	☐ Change ☐ Addition
NAME		3 2 NAME	
STREET ADDRESS		3 3 STREET ADDRESS	
CITY ST ZIP		3 4 CITY ST ZIP	
TITLE		4 1 TITLE	☐ Change ☐ Addition
NAME		4 2 NAME	
STREET ADDRESS		4 3 STREET ADDRESS	
CITY ST ZIP		4 4 CITY ST ZIP	
TITLE		5 1 TITLE	☐ Change ☐ Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY ST ZIP		5 4 CITY ST ZIP	
TITLE		6 1 TITLE	☐ Change ☐ Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY ST ZIP		6 4 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing 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 12 or Block 13 with changed, or on an attachment with an address.

SIGNATURE: G. Michael Garrott, Pres. 4/25/95 813-741-8843
SIGNATURE AND TYPED OR PRINTED NAME OF DIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)

0330408 CP