

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 627581

FILED
Mar 22, 2012
Secretary of State

Entity Name: HOBIE NAPIER INSURANCE AGENCY, INC.

Current Principal Place of Business:

1209 SAXON BLVD.,STE.1
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

1209 SAXON BLVD.,STE.1
ORANGE CITY, FL 32763

New Mailing Address:

FEI Number: 59-1924622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAPIER, HOBERT, JR.
1209 SAXON BLVD.,STE.1
ORANGE CITY, FL 327635402 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: S
Name: NAPIER, KATHRYN B
Address: 2109 GRAND AVE
City-St-Zip: DELAND, FL 32720 US

Title: PDT
Name: NAPIER, HOBERT, JR.
Address: 2109 GRAND AVE
City-St-Zip: DELAND, FL 32720 US

Title: D
Name: NAPIER, DANIEL
Address: 1475 VOLTAIRE AVE
City-St-Zip: DELTONA, FL 32725

Title: D
Name: NAPIER, HOBERT TIMOTHY
Address: 1105 STRATFORD DR
City-St-Zip: RICHARDSON, TX 75080

Title: D
Name: NAPIER, JAMES M
Address: 5457 OAK CREST LN
City-St-Zip: BUFORD, GA 30518

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: HOBERT NAPIER, JR

PDT

03/22/2012

Electronic Signature of Signing Officer or Director

Date