

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005953

FILED  
Apr 26, 2010  
Secretary of State

**Entity Name:** HUGGINS/DRECKMAN INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

12535 SEAL BEACH BLVD.  
SEAL BEACH, CA 90740

**New Principal Place of Business:**

**Current Mailing Address:**

12535 SEAL BEACH BLVD.  
SEAL BEACH, CA 90740

**New Mailing Address:**

FEI Number: 95-2099672

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PARACORP INCORPORATED  
236 EAST 6TH AVENUE  
TALLAHASSEE, FL 32303 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: CDPS  
Name: DRECKMAN, STANLEY G  
Address: 12535 SEAL BEACH BLVD.  
City-St-Zip: SEAL BEACH, CA 90740

Title: VPT  
Name: DRECKMAN, STANLEY G  
Address: 12535 SEAL BEACH BLVD.  
City-St-Zip: SEAL BEACH, CA 90740

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: STANLEY G. DRECKMAN

CDPS

04/26/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date