## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F08000000741

Entity Name: HORTON INSURANCE AGENCY, INC.

FILED Feb 23, 2012 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
10320 ORLAND PKWY ORLAND PARK, IL 60467				
Current Mailing Address:		New Mailing Address:		
10320 ORLAND PKWY ORLAND PARK, IL 60467				
FEI Number: 36-3672171	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
WIGGINS, CHARLES T 501 COMMENDENCIA ST PENSACOLA, FL 32502	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:				
Electronic Signature of Registered Agent		t	Date	

## **OFFICERS AND DIRECTORS:**

Title:

Name: GILBERT, RICHARD
Address: 10320 ORLAND PKWY
City-St-Zip: ORLAND PARK, IL 60467

Title: D

 Name:
 HOEG, THOMAS

 Address:
 10320 ORLAND PKWY

 City-St-Zip:
 ORLAND PARK, IL 60467

Title: D

 Name:
 HORTON, GLENN

 Address:
 10320 ORLAND PKWY

 City-St-Zip:
 ORLAND PARK, IL 60467

Title: DCO

 Name:
 LIPSIG, ROBERT J

 Address:
 10320 ORLAND PKWY

 City-St-Zip:
 ORLAND PARK, IL 60467

Title: [

Name: NEIMARK, STANLEY C Address: 10320 ORLAND PKWY City-St-Zip: ORLAND PARK, IL 60467

Title: \

 Name:
 DALY, GEORGE M

 Address:
 10320 ORLAND PKWY

 City-St-Zip:
 ORLAND PARK, IL 60467

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: KEVIN PALMER VP 02/23/2012