

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F97707 (6)**
1. Corporation Name
THE JAMES D. MACKEY INSURANCE AGENCY, INC.



Principal Place of Business
**12600 N.W. Harbour Ridge Blvd
13403 WAX MYRTLE TR.
P.O. BOX 2451
STUART FL 34995-2451
Palm City FL 34990**

Mailing Address
**13403 WAX MYRTLE TR.
P.O. BOX 2451 1005
STUART FL 34995-2451
Palm City FL 34990**

3. Date Incorporated or Qualified: **09/01/1982**
3a. Date of Last Report: **01/26/1995**
4. FEI Number: **59-2242052**
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

2. Principal Place of Business
21 **12600 N.W. Harbour Ridge Blvd.**
Suite, Apt. #, etc.:
22
City & State: **Palm City FL**
Zip: **34990** Country: **USA**
23
24
25
26 **P.O. Box 1005**
Suite, Apt. #, etc.:
27
City & State: **Palm City FL**
Zip: **34991** Country: **USA**
28
29
30

9. Name and Address of Current Registered Agent
**SCHULER, JACK C. 12600
13403 WAX MYRTLE TR. 12600 Harbour Ridge Blvd
PALM CITY FL 34990**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable): **12600 Harbour Ridge Blvd.**
83
84 City
85 Zip Code: **FL**

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: _____ (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MACKAY, JAMES D	1.2 NAME	
STREET ADDRESS	2008 ROYAL FERN COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	PALM CITY FL	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DODGE, JOHN B	2.2 NAME	
STREET ADDRESS	13403 WAX MYRTLE TR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	PALM CITY FL	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCKEY, JOHN D.	3.2 NAME	
STREET ADDRESS	2400 S. FEDERAL HWY.	3.3 STREET ADDRESS	
CITY-ST-ZIP	STUART FL	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHULER, JACK C.	4.2 NAME	
STREET ADDRESS	13403 WAX MYRTLE TR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	PALM CITY FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report 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 if changed, or on an attachment with an address.

SIGNATURE: James D. Mackey 3/18/96 286-4463
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E034 (12/95)