

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G60552** (8)

1. Corporation Name

HARRELL AND ASSOCIATES INSURANCE AGENCY INC.



Principal Place of Business

**1312 PLANTATION OAKS DR S
JACKSONVILLE BEACH FL 32250**

Mailing Address

**1312 PLANTATION OAKS DR S
JACKSONVILLE BEACH FL 32250**

3. Date Incorporated or Qualified

09/21/1983

3a. Date of Last Report

04/19/1995

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-2329691

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

10. Name and Address of New Registered Agent

**HARRELL, T. CARL
1312 PLANTATION DRIVE S
JACKSONVILLE BEACH FL 32250**

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 607.0602 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 607.0525, Florida Statutes.

SIGNATURE

Signature of the person who is authorized to sign this statement

NOTE: Required Agent signature required for filing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

FILE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
PD	HARRELL, T. CARL	1312 PLANTATION OAKS DR	JACKSONVILLE BCH FL	☐
VP	HARRELL, JOAN R.	1312 PLANTATION OAKS DR	JACKSONVILLE BCH FL	☐
T	HARRELL, RANDALL D.	1312 PLANTATION OAKS DR	JACKSONVILLE BCH FL	☐
S	HARRELL, LISA L.	1312 PLANTATION OAKS DR	JACKSONVILLE BCH FL	☐
				☐
				☐
				☐

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-STATE-ZIP	5. CHANGE	6. ADDITION
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/96

904-241-3263

CR2E034 (12/95)