

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # H10624 (5)

1. Corporation Name

HUNT INSURANCE GROUP, INC.



Principal Place of Business

% JOHN E. HUNT, JR.
2324 CENTERVILLE RD.
TALLAHASSEE FL 32308-4318

Mailing Address

% JOHN E. HUNT, JR.
2324 CENTERVILLE RD.
TALLAHASSEE FL 32308-4318

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

07/02/1984

3a. Date of Last Report

04/13/1995

4. FEI Number

59-2422893

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

10. Name and Address of New Registered Agent

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 607.0502 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

NO

Signature (word or printed name of registered agent and title, if applicable)

(Word) Registered Agent Signature (word or printed name and title)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CSD
NAME HUNT, JOHN E.
STREET ADDRESS 2324 CENTERVILLE RD.
CITY-STATE-ZIP TALLAHASSEE FL

DELETE

1.1 TITLE C/D
1.2 NAME Hunt, John E.
1.3 STREET ADDRESS 2324 Centerville Road
1.4 CITY-STATE-ZIP Tallahassee, FL 32308

Change Addition

TITLE PD
NAME HUNT, JOHN E., JR.
STREET ADDRESS 2324 CENTERVILLE RD.
CITY-STATE-ZIP TALLAHASSEE FL

DELETE

2.1 TITLE D
2.2 NAME Cox, Audrey H.
2.3 STREET ADDRESS 6630 Man - O - War Trail
2.4 CITY-STATE-ZIP Tallahassee, FL 32308

Change Addition

TITLE V
NAME COX, AUDREY H.
STREET ADDRESS 6630 MAN-O-WAR TR.
CITY-STATE-ZIP TALLAHASSEE FL

DELETE

3.1 TITLE S/T
3.2 NAME Jilk, David J.
3.3 STREET ADDRESS 1306 Lawndale Road
3.4 CITY-STATE-ZIP Tallahassee, FL 32311

Change Addition

TITLE T
NAME JILK, DAVID
STREET ADDRESS 1306 LAWDALE RD.
CITY-STATE-ZIP TALLAHASSEE FL

DELETE

4.1 TITLE D
4.2 NAME Hunt, Scott P.
4.3 STREET ADDRESS 2212 Napoleon Bonaparte
4.4 CITY-STATE-ZIP Tallahassee, FL 32308

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

DELETE

5.1 TITLE D
5.2 NAME Condon, Paul D
5.3 STREET ADDRESS 5431 Lawton Court
5.4 CITY-STATE-ZIP Tallahassee, FL 32311

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

DELETE

6.1 TITLE D
6.2 NAME Hunt, Richard T.
6.3 STREET ADDRESS 1134 Waldon Road
6.4 CITY-STATE-ZIP Tallahassee, FL 32311

Change Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/96 (904)385-3636

CR2E034 (12/95)