

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H44829

Entity Name: W.T. SHIVELY, AGENCY, INC.

FILED  
Apr 18, 2005  
Secretary of State

## Current Principal Place of Business:

7201 NW 11TH PLACE  
GAINESVILLE, FL 32605 US

## New Principal Place of Business:

## Current Mailing Address:

ATTN: LEGAL COMPLIANCE  
PO BOX 147018  
GAINESVILLE, FL 326147018 US

## New Mailing Address:

FEI Number: 59-2498964

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PALMQUIST, JONATHON B  
7201 NW 11TH PLACE  
GAINESVILLE, FL 32605 US

## Name and Address of New Registered Agent:

PALMQUIST, JONATHON B  
7201 NW 11TH PLACE  
GAINESVILLE, FL 32605 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: JONATHON B. PALMQUIST

04/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PDC ( ) Delete  
Name: SHIVELY, WILLIAM J  
Address: 7201 NW 11TH PLACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: S ( ) Delete  
Name: PALMQUIST, JONATHON  
Address: 7201 NW 11TH PLACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: T ( ) Delete  
Name: SHEEKEY, BRIAN T  
Address: 7201 NW 11TH PLACE  
City-St-Zip: GAINESVILLE, FL 32605

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JONATHON B. PALMQUIST

S

04/18/2005

Electronic Signature of Signing Officer or Director

Date