2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# H96183

Entity Name: MIKE HORN INSURANCE AGENCY, INC.

Current Principal Place of Business:

6100 N. TAMIAMI TRAIL STE. 3
SUITE 10
NAPLES, FL 34108 US

New Principal Place of Business:

823 BUTTONBUSH LANE
NAPLES, FL 34108 US

Current Mailing Address:

6100 N. TAMIAMI TRAIL STE. 3
SUITE 10
NAPLES, FL 34108 US

New Mailing Address:

823 BUTTONBUSH LANE
NAPLES, FL 34108 US

FEI Number: 59-2638184 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HORN, MICHAEL F.
6100 N. TAMIAMI TRAIL STE 3
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

HORN, MICHAEL F.
823 BUTTONBUSH LANE
NAPLES, FL 34108 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: MICHAEL F. HORN 04/24/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: HORN, MICHAEL F.,
Address: 823 BUTTONBUSH LANE
City-St-Zip: NAPLES, FL

Title: DST ( ) Delete
Name: HORN, H. ILENE,
Address: 823 BUTTONBUSH LANE
City-St-Zip: NAPLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: HORN, MICHAEL F.,
Address: 823 BUTTONBUSH LANE
City-St-Zip: NAPLES, FL 34108

Title: DST (X) Change ( ) Addition
Name: HORN, H. ILENE,
Address: 823 BUTTONBUSH LANE
City-St-Zip: NAPLES, FL 34108

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MICHAEL F. HORN PRES 04/24/2008
Electronic Signature of Signing Officer or Director Date