## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## FILED Jan 25, 2006 08:00 AM Secretary of State

1. Entity Name HAGAN INSURANCE AGENCY, INC.						
7078 STATE !	Place of Business Mailing Address FATE ROAD 37 NORTH 7078 STATE ROAD 37 NORTH RRY, FL 33860 MULBERRY, FL 33860					
DO NOT WRITE IN THIS SPAC  8. Name and Address of Current Registered Agent				CE	01112006 4. FEI Number 59-366	
HAGAN, CHARLES 7078 STATE RD 37 NORTH MULBERRY, FL 33860-9074				DO NOT WRITE IN THIS SPACE		
<ol> <li>The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fforida. I am familiar with, and accept the obligations of registered agent.</li> <li>SIGNATURE</li> </ol>						
FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  8. Election Campaign Financing Trust Fund Contribution.				noing \$5	.00 May 8e	ЭТАС
TITLE SAME STREET ADDRESS CHY-ST-ZIP	PD HAGAN, CHARLES E 4620 S. GARY AVENUE LAKELAND, FL 33813;	ERS AND DIRECT	ORS			-
TITLE NAME STREET ADDRESS CITY-ST-DP						000000400596 82/02/06-80010-011 15 <b>0.0</b> 0
title Name Street Address City-St-Zip				DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					IN '	THIS SPACE
TITLE MAME STREET ADDRESS C)TY-ST-ZIP	·					
Title Name Street Address City-St-Jip						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the reporter in layer exemption of the corporation or the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.						