

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000105511

FILED  
Jan 06, 2006  
Secretary of State

Entity Name: HKH INSURANCE SERVICES, INC.

## Current Principal Place of Business:

206 SW 10TH ST  
OCALA, FL 34474

## New Principal Place of Business:

206 SW 10TH ST  
OCALA, FL 344744264

## Current Mailing Address:

206 SW 10TH ST  
OCALA, FL 34474

## New Mailing Address:

206 SW 10TH ST  
OCALA, FL 344744264

FEI Number: 59-3753290

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOPKINS, VERNON N  
206 SW 10TH ST  
OCALA, FL 34474 US

## Name and Address of New Registered Agent:

HOPKINS, VERNON N  
206 SW 10TH ST  
OCALA, FL 344744264 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:

01/06/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: HOPKINS, VERNON N  
Address: 206 SW 10TH ST  
City-St-Zip: OCALA, FL 34474

Title: VP ( ) Delete  
Name: KAPEC, THODDEUS W  
Address: 206 SW 10TH ST  
City-St-Zip: OCALA, FL 34474

Title: S ( ) Delete  
Name: HILL, PATRICK M  
Address: 206 SW 10TH ST  
City-St-Zip: OCALA, FL 34474

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: HOPKINS, VERNON N  
Address: 1906 CLATTERBRIDGE ROAD  
City-St-Zip: OCALA, FL 344718352

Title: VP (X) Change ( ) Addition  
Name: KOPEC, THADDEUS W  
Address: 4980 SW 7TH AVENUE RD  
City-St-Zip: OCALA, FL 344746072

Title: S (X) Change ( ) Addition  
Name: HILL, PATRICK M  
Address: 1516 SE 23RD AVENUE  
City-St-Zip: OCALA, FL 344712613

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICK M HILL

S

01/06/2006

Electronic Signature of Signing Officer or Director

Date