

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000134881

FILED
Apr 03, 2011
Secretary of State

Entity Name: HOSKENS INSURANCE AGENCY, INC.

Current Principal Place of Business:

7325 WALNUT AVE
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

PO BOX 1179
GOLDENROD, FL 32733

New Mailing Address:

FEI Number: 59-1945866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOSKENS, HARRY
7325 WALNUT AVE
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PVTs
Name: HOSKENS, HARRY
Address: PO BOX 1179
City-St-Zip: GOLDENROD, FL 32733

I hereby 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 all other like empowered.

SIGNATURE: HARRY HOSKENS

MR

04/03/2011

Electronic Signature of Signing Officer or Director

Date