

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000022843

FILED
Feb 17, 2011
Secretary of State

Entity Name: MITCHELL INSURANCE AND FINANCIAL SERVICES, INC.

Current Principal Place of Business:

7855 ARGYLE FOREST BLVD.
SUITE 904
JACKSONVILLE, FL 32244

New Principal Place of Business:

Current Mailing Address:

7855 ARGYLE FOREST BLVD.
SUITE 904
JACKSONVILLE, FL 32244

New Mailing Address:

FEI Number: 13-4273532

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRUMMOND, DONALD L
10738 STANTON HILLS DRIVE E
JACKSONVILLE, FL 32222 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: D
Name: MITCHELL, CHARLES R
Address: 8388 CHASON RD WEST
City-St-Zip: JACKSONVILLE, FL 32244

Title: VP
Name: MITCHELL, CHERYLE A
Address: 8388 CHASON RD WEST
City-St-Zip: JACKSONVILLE, FL 32244

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: CHARLES R. MITCHELL

D

02/17/2011

Electronic Signature of Signing Officer or Director

Date