

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000064280

FILED
Jan 31, 2012
Secretary of State

Entity Name: STEVE HARRELL INSURANCE SERVICES, INC.

Current Principal Place of Business:

2539 ANDERSON DR W
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

2539 ANDERSON DR W
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 14-1906968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRELL, MARK S
2539 ANDERSON DRIVE W
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

HARRELL, MARK S
2539 ANDERSON DRIVE W
CLEARWATER, FL 33761 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:

Electronic Signature of Registered Agent

01/31/2012

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: HARRELL, MARK S
Address: 2539 ANDERSON DR W
City-St-Zip: CLEARWATER, FL 33761

Title: SEC
Name: HARRELL, DIANNE A
Address: 2539 ANDERSON DRIVE W
City-St-Zip: CLEARWATER, FL 33761

Title: D
Name: HARRELL, MARK S
Address: 2539 ANDERSON DRIVE W
City-St-Zip: CLEARWATER, FL 33761

Title: D
Name: HARRELL, DIANNE A
Address: 2539 ANDERSON DRIVE W
City-St-Zip: CLEARWATER, FL 33761

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: MARK S. HARRELL

PRES

01/31/2012

Electronic Signature of Signing Officer or Director

Date