2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 23, 2006
Secretary of State

DOCUMENT# P04000133532

Entity Name: BRUCE HENDRY INSURANCE, INC.

Current Principal Place of Business:

711 WEST MAIN STREET
IMMOKALEE, FL 34142

New Principal Place of Business:

Current Mailing Address:

711 WEST MAIN STREET
IMMOKALEE, FL 34142

New Mailing Address:

FEI Number: 59-2029783 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HENDRY, KAREN
711 WEST MAIN STREET
IMMOKALEE, FL 34142 US

Name and Address of New Registered Agent:

HENDRY, KAREN M
711 WEST MAIN STREET
IMMOKALEE, FL 34142 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: KAREN M HENDRY 10/23/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HENDRY, BRUCE
Address: 711 WEST MAIN STREET
City-St-Zip: IMMOKALEE, FL 34142

Title: VD ( ) Delete
Name: HENDRY, KAREN
Address: 711 WEST MAIN STREET
City-St-Zip: IMMOKALEE, FL 34142

Title: STD ( ) Delete
Name: INGRAM, RACHEL B HENDRY
Address: 711 WEST MAIN STREET
City-St-Zip: IMMOKALEE, FL 34142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: HENDRY, KAREN M
Address: 711 WEST MAIN STREET
City-St-Zip: IMMOKALEE, FL 34142

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: KAREN M HENDRY VD 10/23/2006
Electronic Signature of Signing Officer or Director Date