## 2014 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P12000015916

Entity Name: THE MAVERICK INSURANCE AGENCY, INC.

FILED Jul 17, 2014 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9119 MERRILL ROAD, SUITE 8 JACKSONVILLE, FL 32225 US

Current Mailing Address: New Mailing Address:

9119 MERRILL ROAD, SUITE 8 JACKSONVILLE, FL 32225 US

FEI Number: 45-4566872 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ULSCH, PHILLIP M 8416 FORD ROAD

BRYCEVILLE, FL 32009 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: PHILLIP M. ULSCH

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: MR.

Name: ULSCH, PHILLIP M Address: 8416 FORD ROAD

City-St-Zip: BRYCEVILLE, FL 32009 US

Title: MR.

 Name:
 ULSCH, PHILLIP M

 Address:
 8416 FORD ROAD

 City-St-Zip:
 BRYCEVILLE, FL 32009 US

Title: S

Name: ULSCH, PHILLIP M Address: 8416 FORD ROAD

City-St-Zip: BRYCEVILLE, FL 32009 US

Title: T

Name: ULSCH, PHILLIP M Address: 8416 FORD ROAD

City-St-Zip: BRYCEVILLE, FL 32009 US

Title: D

Name: ULSCH, JOSIE B Address: 8416 FORD ROAD

City-St-Zip: BRYCEVILLE, FL 32009 US

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: PHILLIP M. ULSCH MR. 07/17/2014