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APPROVED
AND
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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

95 MAY 11 AM 11:02

DOCUMENT # P93000071131 (5)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AARON TALLEY INSURANCE AND FINANCIAL PLANNING, I
NC.

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 10/06/1993	3a. Date of Last Report 06/17/1994
4. FEI Number 59-3226661	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☐ No	

1. Principal Place of Business 501 MARY ESTHER CUTOFF #2 FORT WALTON BEACH FL 32548 US		2a. Mailing Address P. O. BOX 1569 FORT WALTON BEACH FL 32548 US	
2. Principal Place of Business 21	2a. Mailing Address 26	3. Date incorporated or Qualified 10/06/1993	3a. Date of Last Report 06/17/1994
State App # etc. 22	State App # etc. 27	4. FEI Number 59-3226661	Applied For Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
City 24	City 29	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
County 25	County 30	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TALLEY, AARON C JR.
501 MARY ESTHER CUTOFF
FORT WALTON BEACH FL 32548

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

11. Pursuant to the provisions of Sections 607.01(2)(c) and 607.1508, Florida Statutes, the above named Corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.01(2)(c), Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent in Charge)

(Signature of Registered Agent or Registered Agent in Charge)

(Signature)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME PSTD TALLEY, AARON C JR. 200 S.W. MIRACLE PARKWAY, UNIT 301 FORT WALTON BEACH FL 32548		1. NAME 2. STREET ADDRESS 3. CITY, ST, ZIP	☐ Change ☐ Addition
NAME		4. NAME 5. STREET ADDRESS 6. CITY, ST, ZIP	☐ Change ☐ Addition
NAME		7. NAME 8. STREET ADDRESS 9. CITY, ST, ZIP	☐ Change ☐ Addition
NAME		10. NAME 11. STREET ADDRESS 12. CITY, ST, ZIP	☐ Change ☐ Addition
NAME		13. NAME 14. STREET ADDRESS 15. CITY, ST, ZIP	☐ Change ☐ Addition
NAME		16. NAME 17. STREET ADDRESS 18. CITY, ST, ZIP	☐ Change ☐ Addition
NAME		19. NAME 20. STREET ADDRESS 21. CITY, ST, ZIP	☐ Change ☐ Addition
NAME		22. NAME 23. STREET ADDRESS 24. CITY, ST, ZIP	☐ Change ☐ Addition
NAME		25. NAME 26. STREET ADDRESS 27. CITY, ST, ZIP	☐ Change ☐ Addition
NAME		28. NAME 29. STREET ADDRESS 30. CITY, ST, ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 on Block 12 or Block 13 of changes, or on an attachment with an address.

SIGNATURE:

Aaron C Talley Jr. 5/9/95 904244-2098