

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000032323

Entity Name: J C BARNETT INSURORS, INC.

FILED  
Mar 08, 2005  
Secretary of State

## Current Principal Place of Business:

8910 N DALE MABRY HWY  
SUITE 9  
TAMPA, FL 33614 US

## New Principal Place of Business:

2450 S SUNCAOST HIGHWAY  
HOMOSASSA, FL 34448 US

## Current Mailing Address:

8910 N DALE MABRY HWY  
SUITE 9  
TAMPA, FL 33614 US

## New Mailing Address:

2450 S. SUNCOAST HIGHWAY  
HOMOSASSA, FL 34448 US

FEI Number: 59-3238228

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARNETT, JAMES C  
15419 BRUSHWOOD DR  
TAMPA, FL 33624 US

## Name and Address of New Registered Agent:

CONNLEY, JEFFERY  
2450 S SUNCOAST HIGHWAY  
HOMOSASSA, FL 34448 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: JEFF CONNLEY

03/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BARNETT, JAMES C  
Address: 15419 BRUSHWOOD DR  
City-St-Zip: TAMPA, FL 33624

Title: D ( ) Delete  
Name: BARNETT, JUDITH C  
Address: 15419 BRUSHWOOD DR  
City-St-Zip: TAMPA, FL 33624

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CONNLEY, JEFFERY  
Address: 2450 S SUNCOAST HIGHWAY  
City-St-Zip: HOMOSASSA, FL 34448

Title: VP (X) Change ( ) Addition  
Name: CONNLEY, PATTY  
Address: 2450 S SUNCOAST HIGHWAY  
City-St-Zip: HOMOSASSA, FL 34448

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JEFFERY CONNLEY

P

03/08/2005

Electronic Signature of Signing Officer or Director

Date