

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000084985

FILED
Jan 05, 2004
Secretary of State

Entity Name: CARTER INSURANCE AGENCY INC.

Current Principal Place of Business:

4342 UNIVERSITY BLVD S
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

4342 UNIVERSITY BLVD S
JACKSONVILLE, FL 32207 US

New Mailing Address:

FEI Number: 59-3321676 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARTER, KATHY G
5972 UNIVERSITY BLVD. WEST STE 1
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: GARRELL, MELISSA B
Address: 3857 E KARRISSA ANN PLACE
City-St-Zip: JACKSONVILLE, FL 32223

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: CARTER, DAVID E II
Address: 3015 CYPRESS DRIVE EAST
City-St-Zip: PONTE VEDRA BEACH,, FL 32082

Title: PRES () Change (X) Addition
Name: CARTER, KATHY G
Address: 3015 CYPRESS DRIVE EAST
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: KATHY G. CARTER

PRES

01/05/2004

Electronic Signature of Signing Officer or Director

_____ Date