

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000095356

Entity Name: ESTESS INSURANCE, INC.

**FILED**  
**Mar 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1926 1/2 TYLER STREET  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2428  
HOLLYWOOD, FL 33022

**New Mailing Address:**

FEI Number: 65-0647699

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HURLEY, MELISSA  
449 SUNSET DRIVE  
HALLANDALE, FL 33009 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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: HURLEY, MELISSA E PRES  
Address: 449 SUNSET DRIVE  
City-St-Zip: HALLANDALE, FL 33009 US

Title: V P  
Name: ESTESS, GEORGE V P  
Address: 400 E. GOVERNMENT STREET  
City-St-Zip: PENSACOLA, FL 32501

Title: SEC  
Name: MCARTHY, SUEANN SECRETA  
Address: 1208 S NORTH LAKE DRIVE  
City-St-Zip: HOLLYWOOD, FL 33019

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: MELISSA E HURLEY

PRES

03/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date