

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000100962

FILED
Mar 16, 2011
Secretary of State

Entity Name: JAMES HARMON INSURANCE AGENCY, INC.

Current Principal Place of Business:

5538-B NW 43 ST.
GAINESVILLE, FL 32653

New Principal Place of Business:

Current Mailing Address:

5538-B NW 43 ST.
GAINESVILLE, FL 32653

New Mailing Address:

FEI Number: 59-3478369

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARMON, JAMES
5538-B NW 43 ST.
GAINESVILLE, FL 32653 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: P
Name: HARMON, JAMES N
Address: 5538-B NW 43RD ST.
City-St-Zip: GAINESVILLE, FL 32653

Title: ST
Name: HARMON, CARLENE T
Address: 5538-B NW 43RD ST.
City-St-Zip: GAINESVILLE, FL 32653

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: JAMES HARMON

PRES

03/16/2011

Electronic Signature of Signing Officer or Director

Date