

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000019106

FILED
Apr 16, 2007
Secretary of State

Entity Name: BILL BEATY INSURANCE AGENCY, INC.

Current Principal Place of Business:

2727 B CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308

New Principal Place of Business:

2724-2 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308

Current Mailing Address:

2727 B CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308

New Mailing Address:

2724-2 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308

FEI Number: 59-3497226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEATY, JAMES W
2727 B CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

BEATY, JAMES W
2724-2 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308 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:

04/16/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BEATY, JAMES W
Address: 2727 B CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: BEATY, ALICE A
Address: 2724-2 CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: SEC () Change (X) Addition
Name: BEATY, JENNIFER L
Address: 2724-2 CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JAMES W BEATY

DP

04/16/2007

Electronic Signature of Signing Officer or Director

Date