

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000023421

Entity Name: JANINE MCKINNEY INSURANCE, INC.

FILED  
Apr 19, 2006  
Secretary of State

## Current Principal Place of Business:

111 SW 8TH ST  
OCALA, FL 34474

## New Principal Place of Business:

## Current Mailing Address:

111 SW 8TH ST  
OCALA, FL 34474

## New Mailing Address:

420 SE 8TH STREET  
OCALA, FL 34471

FEI Number: 59-3498231

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCKINNEY, JANINE  
2601 SE 29 LANE  
OCALA, FL 34471 US

## Name and Address of New Registered Agent:

MCDONALD, JOHN M  
2574 SE 27TH STREET  
OCALA, FL 34471 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: JOHN M. MCDONALD

04/19/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MCKINNEY, JANINE  
Address: 2601 SE 29 LANE  
City-St-Zip: OCALA, FL 34471

Title: VP ( ) Delete  
Name: MCDONALD, JOHN M  
Address: 420 SE 8TH STREET  
City-St-Zip: OCALA, FL 34471

Title: SEC ( ) Delete  
Name: RECTOR, JOAN M  
Address: 420 SE 8TH STREET  
City-St-Zip: OCALA, FL 34471

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MCDONALD, JOHN M  
Address: 2574 SE 27TH STREET  
City-St-Zip: OCALA, FL 34471

Title: VP (X) Change ( ) Addition  
Name: RECTOR, JOAN M  
Address: 420 SE 8TH STREET  
City-St-Zip: OCALA, FL 34471

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

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: JOHN M. MCDONALD

P

04/19/2006

Electronic Signature of Signing Officer or Director

Date