

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000093432

FILED
Mar 31, 2004
Secretary of State

Entity Name: ARNOLD WHISENANT INSURANCE, INC.

Current Principal Place of Business:

6011-8 103RD STREET
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

6011-8 103RD STREET
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 59-3541897

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHISENANT, ARNOLD JR
4414 SHILOH LN
JACKSONVILLE, FL 32210 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: P () Delete
Name: WHISENANT, ARNOLD JR
Address: 6011-8 103RD ST
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ARNOLD WHISENANT JR

P

03/31/2004

Electronic Signature of Signing Officer or Director

Date