2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P99000003542 DOCUMENT #

1. Entity Name

ELBERT TUCKER INSURANCE, INC.



Principal Place of Business

Mailing Address

1044 CR 305

Zip

BUNNELL FL 32110

PO DRAWER 1639 BUNNELL FL 32110

2. Principal Place of Business Suite, Apt. #, etc.

3. Mailing Address Suite, Apt. #, etc.

City & State

Country

City & State

Country

4. FEI Number

5. Certificate of Status Desired

Fee Required 7. Name and Address of New Registered Agent

59-3552295

TUCKER, ELBERT

1044 CR 305 BUNNELL FL 32110 Name

Street Address (P.O. Box Number is Not Acceptable)

City

May 02, 2003 8:00 am Secretary of State

05-02-2003 90711 023 ***150.00

☐ CHECK HERE IF MAKING CHANGES

Zip Code

\$8.75 Additional

Applied For

Not Applicable

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

6. Name and Address of Current Registered Agent

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing

\$5.00 May Be

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State

Trust Fund Contribution.

Added to Fees

OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE Director ☐ Delete ☐ Change Addition NAME NAME T⊌CKER. ELBERT F Joel E Tucker STREET ADDRESS STREET ADDRESS 923 COUNTY RD 90 E South Temple CITY-ST-ZIP CITY-ST-ZIP BUNNELL FL 32110 TITLE Delete Director VST 🔑 TITLE Addition ☐ Change NAME NAME Caleb F. Tucker TUCKER, PAMELA M STREET ADDRESS STREET ADDRESS 926 COUNTY ROAD 90 E 26 County Road 90 E CITY-ST-ZIP CITY-ST-ZIP BUNNELL FL 32110 -unnelli TITLE ☐ Delete TITLE Director ☐ Change Addition NAME 26 County Road 90 E STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP Bunnell TITLE ☐ Delete TITLE irector Change Addition leesha R. Tucker 26 County Road 90 E Sunnell, FL 32110 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-7IP Bunnell Change Director **X** Addition TITLE ☐ Delete TITLE NAME NAME Janeen M. Tucke STREET ADDRESS STREET ADDRESS db County Road 90 E CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: