

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000016807

Entity Name: WILEY'S INSURANCE, INC.

FILED
Feb 20, 2012
Secretary of State

Current Principal Place of Business:

483 S. MARION AVE.
LAKE CITY, FL 32025 US

New Principal Place of Business:

Current Mailing Address:

483 S. MARION AVE.
LAKE CITY, FL 32025 US

New Mailing Address:

FEI Number: 59-3561889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNTER, WILEY S
278 NW HARRIS LOOP
LAKE CITY, FL 32055 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: PD
Name: HUNTER, WILEY S
Address: 278 NW HARRIS LOOP
City-St-Zip: LAKE CITY, FL 32055

Title: STD
Name: HUNTER, GAYLE
Address: 278 NW HARRIS LOOP
City-St-Zip: LAKE CITY, FL 32055

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: GAYLE HUNTER

STD

02/20/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date