

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000024996

FILED
Apr 26, 2007
Secretary of State

Entity Name: HOWARD R. KITE INSURANCE AGENCY, INC.

Current Principal Place of Business:

304 WEST CERVANTES STREET
PENSACOLA, FL 325013030

New Principal Place of Business:

15 MEMORY LANE
PENSACOLA, FL 32503

Current Mailing Address:

304 WEST CERVANTES STREET
PENSACOLA, FL 325013030

New Mailing Address:

15 MEMORY LANE
PENSACOLA, FL 32503

FEI Number: 59-3566443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KITE, HOWARD R
304 WEST CERVANTES STREET
PENSACOLA, FL 325013030 US

Name and Address of New Registered Agent:

KITE, HOWARD R
15 MEMORY LANE
PENSACOLA, FL 32503 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: HOWARD R. KITE

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: KITE, HOWARD R
Address: 304 WEST CERVANTES STREET
City-St-Zip: PENSACOLA, FL 325013030

Title: V/S () Delete
Name: KITE, DEBRA L
Address: 304 W CERVANTES ST
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: KITE, HOWARD R
Address: 15 MEMORY LANE
City-St-Zip: PENSACOLA, FL 32503

Title: V/S (X) Change () Addition
Name: KITE, DEBRA L
Address: 15 MEMORY LANE
City-St-Zip: PENSACOLA, FL 32503

I hereby certify that the information supplied with this filing does not qualify 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: DEBRA KITE

V

04/26/2007

Electronic Signature of Signing Officer or Director

Date