

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S14484

FILED  
Feb 18, 2010  
Secretary of State

Entity Name: MCMAHON-HADDER INSURANCE, INC.

**Current Principal Place of Business:**

375 N 9TH AVE  
SUITE A  
PENSACOLA, FL 32502 US

**New Principal Place of Business:**

**Current Mailing Address:**

375 N 9TH AVE  
SUITE A  
PENSACOLA, FL 32502 US

**New Mailing Address:**

FEI Number: 59-3032884      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCMAHON, DONALD P  
3281 SEVILLE DRIVE  
PENSACOLA, FL 32503 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: PD  
Name: MCMAHON, DONALD P  
Address: 3281 SEVILLE DRIVE  
City-St-Zip: PENSACOLA, FL 32503

Title: VPDT  
Name: HADDER, WILLIAM H VP  
Address: 5582 TIMBER CREEK DR  
City-St-Zip: MILTON, FL 32571

Title: VPS  
Name: MCMAHON, JOHN W VPST  
Address: 287 PLANTATION HILL RD  
City-St-Zip: GULF BREEZE, FL 32561

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: WILLIAM H HADDER

VPDT

02/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date