2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2015
Secretary of State
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Entity Name: BROWNING INSURANCE AGENCY, INC.

Current Principal Place of Business:

1 NORTH MAIN ST.
BROOKSVILLE, FL 34601

Current Mailing Address:

P.O. BOX 818
BROOKSVILLE, FL 34605-0818 US

FEI Number: 59-0769144

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWNING, MARK E.
1 NORTH MAIN STREET
BROOKSVILLE, FL 34601 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PD	Title	VTD
Name	BROWNING, MARK E.	Name	BROWNING, S. SCOTT
Address	1 N. MAIN STREET	Address	1 N. MAIN STREET
City-State-Zip:	BROOKSVILLE FL 34601	City-State-Zip:	BROOKSVILLE FL 34601

Title	VSD
Name	BROWNING, JON THOMAS
Address	1 N. MAIN STREET
City-State-Zip:	BROOKSVILLE FL 34601

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: MARK E BROWNING PRESIDENT 01/09/2015

Electronic Signature of Signing Officer/Director Detail — Date