

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L83397

**Entity Name:** HUGH BARNDOLLAR INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

14119 POINTE ANNE DRIVE  
ODESSA, FL 33556

**Current Mailing Address:**

14119 POINTE ANNE DRIVE  
ODESSA, FL 33556 US

**FEI Number: 59-3014098**

**Certificate of Status Desired: Yes**

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

BARNDOLLAR, HUGH OIII MR  
14119 POINT ANNE DR  
ODESSA, FL 33556 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: HUGH BARNDOLLAR**

**01/24/2013**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name BARNDOLLAR, HUGH OIII  
Address 17607 GLENAPP DR  
City-State-Zip: LAND O LAKES FL 34638

Title VP  
Name BARNDOLLAR, HUGH OSR  
Address 144119 POINTE ANNE DR  
City-State-Zip: ODESSA FL 33556

Title S  
Name BARNDOLLAR, AMY P  
Address 17607 GLENAPP DRIVE  
City-State-Zip: LAND O LAKES FL 34638

Title CEO  
Name HAYWOOD, DENNY MR.  
Address GLENAPP DRIVE  
City-State-Zip: LAND O LAKES FL 34638

*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: HUGH BARNDOLLAR**

**PRESIDENT**

**01/24/2013**

Electronic Signature of Signing Officer/Director Detail

Date