2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2019
Secretary of State
1448495902CC

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Entity Name: DAVID BARNETTE INSURANCE, INC.

Current Principal Place of Business:

502 OSCEOLA AVE
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

502 OSCEOLA AVE
JACKSONVILLE BEACH, FL 32250

FEI Number: 06-1676096

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVID BARNETTE
502 OSCEOLA AVE
JACKSONVILLE BEACH, FL 32250 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	PSTD
Name	BARNETTE, DAVID L
Address	502 OSCEOLA AVE
City-State-Zip:	JACKSONVILLE BEACH FL 32250

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: DAVID BARNETTE PRESIDENT 01/29/2019

Electronic Signature of Signing Officer/Director Detail — Date