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. 02/19/2015 SIGNATURE: TERENCE J HANBURY PRESIDENT

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT
DOCUMENT# P05000046643

Entity Name: TERENCE J. HANBURY INSURANCE AGENCY, INCORPORATED

Current Principal Place of Business: 754 CABLE BEACH LN NORTH PALM BEACH, FL 33410

Current Mailing Address:

754 CABLE BEACH LN NORTH PALM BEACH, FL 33410

FEI Number: 65-0298173

Name and Address of Current Registered Agent:

HANBURY, TERENCE J 754 CABLE BEACH LN NORTH PALM BEACH, FL 33410 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

Officer/Director Detail :

Title	P	Title	SECRETARY/TREASERER	
Name	HANBURY, TERENCE J	Name	HANBURY, BARBARA J	
Address	754 CABLE BEACH LN	Address	754 CABLE BEACH LANE	
City-State-Zip:	NORTH PALM BEACH FL 33410	City-State-Zip:	NO PALM BEACH FL 33410	

Electronic Signature of Signing Officer/Director Detail

FILED Feb 19, 2015 Secretary of State CC4280200335

Date

Certificate of Status Desired: No

Date