

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000105148

Entity Name: BARRETT HARDING INSURANCE INC.

Current Principal Place of Business:

10014 GROVE DR.
SUITE A
PORT RICHEY, FL 34668

Current Mailing Address:

10014 GROVE DR.
SUITE A
PORT RICHEY, FL 34668

FEI Number: 45-4014784

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARDING, LORI
10014 GROVE DR.
SUITE A
PORT RICHEY, FL 34668 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 P
Name HARDING, LORI
Address 10014 GROVE DR. SUITE A
City-State-Zip: PORT RICHEY FL 34668

Title VP
Name HARDING, JEROMY
Address 10014 GROVE DR. SUITE A
City-State-Zip: PORT RICHEY FL 34668

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: LORI HARDING

PRESIDENT

02/20/2015

Electronic Signature of Signing Officer/Director Detail

Date