

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001845

FILED
Jul 16, 2004
Secretary of State

Entity Name: BROWN & BROWN INSURANCE OF GEORGIA, INC.

Current Principal Place of Business:

605 EAST FIRST STREET
ROME, GA 30161

New Principal Place of Business:

1117 PERIMETER CENTER WEST
STE. N-400
ATLANTA, GA 30338

Current Mailing Address:

605 EAST FIRST STREET
ROME, GA 30161

New Mailing Address:

1117 PERIMETER CENTER WEST
STE. N-400
ATLANTA, GA 30338

FEI Number: 58-0840189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: BROWN, J. HYATT
Address: 220 SOUTH RIDGEWOOD AVENUE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: T () Delete
Name: WALKER, CORY T
Address: 220 SOUTH RIDGEWOOD AVENUE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VS () Delete
Name: GRAMMIG, LAUREL L
Address: 401 E. JACKSON STREET, SUITE 1700
City-St-Zip: TAMPA, FL 33602

Title: VAS () Delete
Name: DONEGAN, THOMAS M JR.
Address: 401 E. JACKSON STREET, SUITE 1700
City-St-Zip: TAMPA, FL 33602

Title: CEO () Delete
Name: SHERTENLIEB, GARY
Address: 1117 PERIMETER CENTER WEST, SUITE N-400
City-St-Zip: ATLANTA, GA 30338

Title: V () Delete
Name: YAWN, A. DES
Address: 1117 PERIMETER CENTER WEST, SUITE N-400
City-St-Zip: ATLANTA, GA 30338

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DOWNS, LINDA
Address: 401 E. JACKSON ST., STE. 1700
City-St-Zip: TAMPA, FL 33602

Title: TVP (X) Change () Addition
Name: WALKER, CORY T
Address: 220 SOUTH RIDGEWOOD AVENUE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: EVP (X) Change () Addition
Name: HUFFMAN, ROCKY
Address: 1117 PERIMETER CENTER WEST, SUITE N-400
City-St-Zip: ATLANTA, GA 30338

Title: SEVP (X) Change () Addition
Name: YAWN, A. DES
Address: 1117 PERIMETER CENTER WEST, SUITE N-400
City-St-Zip: ATLANTA, GA 30338

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LAUREL L. GRAMMIG

VPS

07/16/2004

Electronic Signature of Signing Officer or Director

Date