


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 26, 2006 8:00 am
Secretary of State

05-26-2006 90014 030 ***150.00

DOCUMENT # J06907			
1. Entity Name PRODUCERS ASSOCIATES, INC.			
Principal Place of Business 2333 BRICKELL AVE. #1701 MIAMI, FL 33128 US		Mailing Address 9741 SW 45 ST. MIAMI, FL 33165 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc. # 2308		Suite, Apt. #, etc.	
City & State		City & State	
Zip 33129-2414		Country	
4. FEI Number 59-2689141		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SKOKE, BERNARD G. 2333 BRICKELL AVE. #1803 MIAMI, FL 33129		Name Street Address (P.O. Box Number is Not Acceptable) # 2308 City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reissuing) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SKOKE, BERNARD G. 2333 BRICKELL AVE #1803 MIAMI, FL 33129 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2333 BRICKELL AVE #2308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PACHECO, LINDA 9741 SW 45 ST MIAMI, FL 33165 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FISHER, JEFFREY A. 13800 SW 20 ST DAVIE, FL 33325 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Linda Pacheco</i> LINDA PACHECO		4/4/06 305-554-6908	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

J001J761



02072006 Chg-P CR2E034 (11/05)

ATTACHMENT
50019721
PRODUCERS ASSOCIATES
9741 SW 45 STREET
MIAMI, FL. 33165

May 23, 2006

Divisions of Corporations
P. O. Box 1500
Tallahassee, Fl. 32302-1500

To Whom It May Concern:

Ref: 59-2689141
Document #J06907

Please be advised that we sent out our Annual Report and payment on April 4, 2006. However, apparently, the mail was returned to our corporate office in Omaha, Nebraska as undeliverable. They in turn resent it to Tallahassee and it was returned again. Please see copy of their letter enclosed.


When we called your office we were instructed to resend the check and form with a letter of explanation. If you refer to your records, you will see that we have never been late in sending in our payment each year.

Therefore, we respectfully request that you please accept the enclosed check #3663 in the amount of \$150.00 as payment on time.

If you have any questions, please do not hesitate to give me a call at 305-546-2167 which is my cell.

Thanking you in advance, I remain,

Sincerely,


Linda Pacheco
Secretary/Treasurer

ATTACHMENT
~~50019721~~
J069107



11808 Grant Street
Omaha, NE 68164
p. 402.496.8300
f. 402.496.8040

To Whom It May Concern:

We received this check here at World Insurance Company and we are returning it to you because we attempted to forward it to Florida Department of State but it was returned to us as an insufficient address.

Thanks,

World Insurance Company