2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K49104

FILED Mar 05, 2004 Secretary of State

Entity Name: FIDELITY INSURANCE AGENCY, INC.

	Principal Place	of Business:	New Principal Place	of Business:
	IORAN BLVD LD BEACH, FL	33442		
Current N	Mailing Addres	s:	New Mailing Addres	ss:
LEGAL DI	MORAN BLVD EPT MAILDROF LD BEACH, FL			
FEI Numbe	r: 65-0087356	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
1200 S. P	PORATION SYS INE ISLAND RO TION, FL 33324	DAD		
	e named entity s te of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
SIGNATU	IRE:			
	Electron	ic Signature of Registered Ag	ent	Date
Election Ca	mpaign Financing	Trust Fund Contribution ().		
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTO
Title: Name:	D () MORAN, PATRI		Title: Name:	() Change () Addition
Address:	100 JIM MORAI DEERFIELD BE	N BLVD EACH, FL 33442	Address: City-St-Zip:	
Address: City-St-Zip: Title: Name: Address:	DEERFIELD BE D () BROWN, COLIN 100 JIM MORAI	EACH, FL 33442 Delete NW		() Change() Addition
Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	DEERFIELD BE D () BROWN, COLIN 100 JIM MORAI DEERFIELD BE PD () FEAGLES, LOU 100 JIM MORAI	EACH, FL 33442 Delete NW NBLVD EACH, FL 33442 Delete IIS R	City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition
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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: JOHN J. WHELAN S 03/05/2004

OSSENBECK, PATRICK C. TREASURER 100 JIM MORAN BLVD. DEERFIELD BEACH FL 33442

GUTTUSO, MARIA K VPGCAS 100 JIM MORAN BLVD. DEERFIELD BEACH FL 33442

MCWILLIAMS, DONNA C. VPATD 100 JIM MORAN BLVD. DEERFIELD BEACH FL 33442

COOMBS, RONALD M. VPCFOATD 100 JIM MORAN BLVD. DEERFIELD BEACH FL 33442