

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L09483

**FILED**  
**Mar 31, 2005**  
**Secretary of State**

**Entity Name:** RICHARDSON INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

9740 SAN JOSE BLVD.  
STE 104  
JACKSONVILLE, FL 32257 US

**New Principal Place of Business:**

9880 SAN JOSE BLVD.  
STE 3  
JACKSONVILLE, FL 32257 US

**Current Mailing Address:**

% CHARLES A. RICHARDSON  
P.O. BOX 5711  
JACKSONVILLE, FL 32247 US

**New Mailing Address:**

**FEI Number:** 59-2909192      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RICHARDSON, LORAINA G  
9740 SAN JOSE BLVD  
SUITE 104  
JACKSONVILLE, FL 32257 US

**Name and Address of New Registered Agent:**

RICHARDSON, LORAINA G  
9880 SAN JOSE BLVD  
SUITE 3  
JACKSONVILLE, FL 32257 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: LORAINA G. RICHARDSON      03/31/2005  
Electronic Signature of Registered Agent      Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: RICHARDSON, LORAINA, G.  
Address: 9740 SAN JOSE BLVD.  
City-St-Zip: JACKSONVILLE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: RICHARDSON, LORAINA, G.  
Address: 9880 SAN JOSE BLVD., STE 3  
City-St-Zip: JACKSONVILLE, FL 32257

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: LORAINA G. RICHARDSON      P D      03/31/2005  
Electronic Signature of Signing Officer or Director      Date