

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000023586

FILED
Apr 25, 2005
Secretary of State

Entity Name: FLORIDA WINDSTORM INSURANCE DISCOUNT INSPECTIONS, INC.

Current Principal Place of Business:

509 NE 64TH STREET
APT 2
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

509 NE 64TH STREET
APT. 2
MIAMI, FL 33138

New Mailing Address:

FEI Number: 61-1409170 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BROUSSEAU, KEVIN
509 NE 64TH STREET
APT 2
MIAMI, FL 33138 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D, P () Delete
Name: BROUSSEAU, KEVIN
Address: 509 NE 64TH STREET, APT. 2
City-St-Zip: MIAMI, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: KEVIN BROUSSEAU

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04/25/2005

Electronic Signature of Signing Officer or Director

_____ Date