

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000044036

FILED
Apr 30, 2006
Secretary of State

Entity Name: INSURANCE AGENCY OF TAMPA, INC.

Current Principal Place of Business:

13514 LAKE MAGDALENE DRIVE
TAMPA, FL 33613

New Principal Place of Business:

7211 N DALE MABRY HWY
108
TAMPA, FL 33614

Current Mailing Address:

13514 LAKE MAGDALENE DRIVE
TAMPA, FL 33613

New Mailing Address:

FEI Number: 20-2923158 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROHENZA, ROLANDO
13514 LAKE MAGDALENE DRIVE
TAMPA, FL 33613 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 () Delete
Name: PROHOWLA, ROLANDO
Address: 13514 LAKE MAGDALINE DRIVE
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PROHENZA, ROLANDO
Address: 13514 LAKE MAGDALINE DRIVE
City-St-Zip: TAMPA, FL 33613

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ROLANDO PROHENZA

PRES

04/30/2006

Electronic Signature of Signing Officer or Director

Date