

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000108864

Entity Name: TRUSTAMERICA INC.

FILED  
Jun 16, 2005  
Secretary of State

**Current Principal Place of Business:**

28870 US HWY 19 N STE 500  
CLEARWATER, FL 33761

**New Principal Place of Business:**

**Current Mailing Address:**

28870 US HWY 19 N STE 500  
CLEARWATER, FL 33761

**New Mailing Address:**

FEI Number: 20-1457309

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

AVERA, SHAWN P  
28870 US HWY 19 N STE 500  
CLEARWATER, FL 33761 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: SHAWN P. AVERA

06/16/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: BACHE, ROBERT W  
Address: 28870 US HWY 19 N STE 500  
City-St-Zip: CLEARWATER, FL 33761

Title: DVS ( ) Delete  
Name: PANNONE, RAYMOND R  
Address: 28870 US HWY 19 N STE 500  
City-St-Zip: CLEARWATER, FL 33761

Title: DT (X) Delete  
Name: BACHE, LARRY E JR  
Address: 28870 US HWY 19 N STE 500  
City-St-Zip: CLEARWATER, FL 33761

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

Title: DP (X) Change ( ) Addition  
Name: BACHE, KATHYRN K  
Address: 1437 WILLOW BROOK DR  
City-St-Zip: PALM HARBOR, FL 34683

Title: VST (X) Change ( ) Addition  
Name: AVERA, SHAWN P  
Address: 950 BELTREES ST APT K  
City-St-Zip: DUNEDIN, FL 34698

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: SHAWN P. AVERA

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06/16/2005

Electronic Signature of Signing Officer or Director

Date