

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 177862

FILED
Jan 07, 2005
Secretary of State

Entity Name: MATTIS INSURANCE INC.

Current Principal Place of Business:

800 EAST CYPRESS CREEK ROAD, STE 400
FT. LAUDERDALE, FL 33334 US

New Principal Place of Business:

Current Mailing Address:

P O DRAWER 9328
FT LAUDERDALE, FL 33310 US

New Mailing Address:

FEI Number: 59-0710054

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RINALDI, LISA
5800 N ANDREWS AVE
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

RINALDI, LISA
800 EAST CYPRESS CREEK ROAD SUITE 400
FORT LAUDERDALE, FL 33334 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:

01/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: RINALDI, RAYMOND
Address: 5800 N ANDREWS AVE
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: P () Delete
Name: RINALDI, LISA
Address: 5800 N ANDREWS AVE
City-St-Zip: FT LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: RINALDI, RAYMOND
Address: 800 EAST CYPRESS CREEK ROAD SUITE 400
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: P (X) Change () Addition
Name: RINALDI, LISA
Address: 800 EAST CYPRESS CREEK ROAD SUITE 400
City-St-Zip: FT LAUDERDALE, FL 33334

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: LISA RINALDI

P

01/07/2005

Electronic Signature of Signing Officer or Director

Date