

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 230258

FILED
Mar 14, 2006
Secretary of State

Entity Name: JACK RICE INSURANCE, INC.

Current Principal Place of Business:

13080 S. BELCHER RD.,STE.H
LARGO, FL 33773

New Principal Place of Business:

Current Mailing Address:

13080 S. BELCHER RD.,STE.H
LARGO, FL 33773

New Mailing Address:

FEI Number: 59-0877777 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RICE, JACK S
14261 LARK CT
CLEARWATER, FL 34622 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: PD () Delete
Name: RICE, JACK S.,
Address: 14261 LARK CT.
City-St-Zip: CLEARWATER, FL

Title: VP () Delete
Name: WEBSTER, CYNTHIA M.
Address: 2289 PINNACLE CIRCLE N
City-St-Zip: PALM HARBOR, FL

Title: VPD () Delete
Name: RICE, JACK S. JR.
Address: 13080 S. BELCHER RD., # H
City-St-Zip: LARGO, FL

Title: VP () Delete
Name: GROBMYER, JR., JAMES E
Address: 775 35TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33704

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: JACK S. RICE

PD

03/14/2006

Electronic Signature of Signing Officer or Director

Date