2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 293182

FILED Feb 23, 2004 Secretary of State

Entity Name: FLORIDA COMBINED INSURANCE AGENCY, INC.

Current Principal Place of Business: New Principal Place of Business: 5011 GATE PARKWAY, BLDG 200, SUITE 400 JACKSONVILLE, FL 32256 **Current Mailing Address: New Mailing Address:** 5011 GATE PARKWAY, BLDG 200, SUITE 400 JACKSONVILLE, FL 32256 FEI Number: 59-1098056 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: HORNE, SUZANNE 4800 DEERWOOD CAMPUS PKWY BUILDING 100-7 JACKSONVILLE, FL 32246 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition SIMMONS, D. RANDEL BENEVENTO, BARBARA G Name: Name: 1650 WATERS EDGE DRIVE 4472 BAY HARBOUR Address: Address: City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: JACKSONVILLE, FL 32225 Title: Title: () Delete CD (X) Change () Addition Name: CASCONE, MICHAEL JR. Name: DOERR, ROBERT CHRIS 8022 JAMES ISLAND TRAIL 8031 ACORN RIDGE ROAD Address: Address: JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition PALLAIS, ROBERT A., Name: Name: 12460 LYDIA WOODS COURT Address: Address: JACKSONVILLE, FL 32258 City-St-Zip: City-St-Zip: Title: PD () Delete Title: (X) Change () Addition LIPTAK, WALTER T., SCHMIDT, TERRI A Name: Name: Address: 3205 OLD BARN COURT Address: 244 ROYAL TERN ROAD NORTH City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: PONTE VEDRA BEACH, FL 32082 Title: Title: () Delete () Change () Addition GRANTHAM, JOSEPH L Name: Name: 6497 RIVER POINT DR Address: Address: GREEN COVE SPRINGS, FL 32043 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition ROLLINSON, JANE E Name: Name: BURWELL, BETH B 8024 PEBBLE CREEK LANE WEST 4441 WORTH DRIVE EAST Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: JACKSONVILLE, FL 32207

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: ROBERT A PALLAIS VT 02/23/2004

SUZANNE HORNE, SECRETARY 12876 PLUMMER GRANT ROAD JACKSONVILLE, FL 32258

BRUCE BAGNI, DIRECTOR 2307 GREENSIDE COURT PONTE VEDRA BEACH, FL 32082

ROBERT I LUFRANO, DIRECTOR 8113 MIDDLE FORK WAY JACKSONVILLE, FL 32256