


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2004 8:00 am
Secretary of State

01-23-2004 90037 019 ***150.00

DOCUMENT # 309709	
1. Entity Name DAVID G. WILLBUR INSURANCE AGENCY, INC	

Principal Place of Business 2716 SO. U.S. HWY. 1 FT. PIERCE, FL 34982-5919 US	Mailing Address 2716 S US HWY 1 FT. PIERCE, FL 34982-5919 US
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2. Principal Place of Business 2222 COLONIAL ROAD	3. Mailing Address 2222 COLONIAL ROAD
Suite, Apt. #, etc. SUITE 100	Suite, Apt. #, etc. SUITE 100
City & State FORT PIERCE, FL	City & State FORT PIERCE, FL
Zip 34950	Country US



01062004 Chg-P CR2E034 (10/03)

4. FEI Number 59-1149489	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WILLBUR, DAVID G. J 2716 SO. US HWY 1 FT. PIERCE, FL 34982	
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7. Name and Address of New Registered Agent	
Name LOUIS I HAYNES	
Street Address (P.O. Box Number is Not Acceptable) 2222 COLONIAL ROAD	
SUITE 100	
City FORT PIERCE	FL Zip Code 34950

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Louis I. Haynes* DATE: 1/16/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WILLBUR, DAVID G. JR. 2716 SOUTH US HWY 1 FT PIERCE, FL 00000, <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WILLBUR, BERNICE B. 2716 SOUTH US HWY 1 FT PIERCE, FL 00000, <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michael J. Duncanson* DATE: 1/16/04 772-461-6040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment

64000832

#309709

Supplement: 2004 For Profit Corporation
Annual Report

David G. Willbur Insurance Agency, Inc. FEIN: 59-1149489

11. Officers and Directors Additions/Changes (Complete Listing)

Title Name Street Address City-St-Zip	PD Haynes, Louis I 2222 Colonial Road, Suite 100 Ft. Pierce, FL 34950	Addition
Title Name Street Address City-St-Zip	VTD Driscoll, Michael J 2222 Colonial Road, Suite 100 Ft. Pierce, FL 34950	Addition
Title Name Street Address City-St-Zip	SD Roberts, J Hal 100 S. 2 nd Street Ft. Pierce, FL 34950	Addition
Title Name Street Address City-St-Zip	D Brown, Michael J 100 S 2 nd Street Ft. Pierce, FL 34950	Addition
Title Name Street Address City-St-Zip	D Enns, Edward G 100 S 2 nd Street Ft. Pierce, FL 34950	Addition
Title Name Street Address City-St-Zip	D Acker, Kenneth 6078 20 th Street Vero Beach, FL 32966	Addition
Title Name Street Address City-St-Zip	D Willbur, David G 2400 SE Midport Road, Suite 110 Port St. Lucie FL 34950	Change

1/16/2004