

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 395294

FILED
Feb 26, 2005
Secretary of State

Entity Name: MELBOURNE INSURANCE AGENCY, INC.

Current Principal Place of Business:

916 S.WICKHAM RD.
W.MELBOURNE, FL 32904

New Principal Place of Business:

Current Mailing Address:

916 S.WICKHAM RD.
W.MELBOURNE, FL 32904

New Mailing Address:

FEI Number: 59-1514506

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEBSTER, EUGENE, O., III
4490 COUNTRY RD.
MELBOURNE, FL 32934 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: PTS () Delete
Name: WEBSTER, EUGENE, O., III
Address: 4490 COUNTRY RD
City-St-Zip: MELBOURNE, FL

Title: D () Delete
Name: WEBSTER, EUGENE O, I, II
Address: 4490 COUNTRY RD
City-St-Zip: MELBOURNE, FL

Title: VD () Delete
Name: WEBSTER, STEPHEN, A,
Address: 3305 WESTLAND RD
City-St-Zip: MELBOURNE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: WEBSTER, EUGENE, O., III
Address: 4490 COUNTRY RD
City-St-Zip: MELBOURNE, FL 32934 US

Title: D (X) Change () Addition
Name: WEBSTER, EUGENE O, I, II
Address: 4490 COUNTRY RD
City-St-Zip: MELBOURNE, FL 32934 US

Title: VD (X) Change () Addition
Name: WEBSTER, STEPHEN, A,
Address: 3305 WESTLAND RD
City-St-Zip: MELBOURNE, FL 32934 US

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: EUGENE O WEBSTER III

P

02/26/2005

Electronic Signature of Signing Officer or Director

Date