

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 422093

FILED
Jan 04, 2005
Secretary of State

Entity Name: LAWRENCE W. MYERS INSURANCE AGENCY, INC.

Current Principal Place of Business:

3044 SOUTH MILITARY TRAIL
LAKE WORTH, FL 33463 US

New Principal Place of Business:

Current Mailing Address:

3044 SOUTH MILITARY TRAIL
LAKE WORTH, FL 33463 US

New Mailing Address:

FEI Number: 59-1491513

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSTON, RICHARD M
3044 SOUTH MILITARY TRAIL
LAKE WORTH, FL 33463 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: P () Delete
Name: DOLBOW, KATHRYN J.
Address: 3044 S. MILITARY TRAIL
City-St-Zip: LAKE WORTH, FL

Title: VD () Delete
Name: JOHNSTON, RICHARD,
Address: 3044 S MILITARY TR
City-St-Zip: LAKE WORTH, FL

Title: ST () Delete
Name: MYERS, FRANCES B
Address: PO BOX 766
City-St-Zip: LAKE WORTH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DOLBOW, KATHRYN J.
Address: 3044 S. MILITARY TRAIL
City-St-Zip: LAKE WORTH, FL 33463 US

Title: VD (X) Change () Addition
Name: JOHNSTON, RICHARD,
Address: 3044 S MILITARY TR
City-St-Zip: LAKE WORTH, FL 33463 US

Title: ST (X) Change () Addition
Name: MYERS, FRANCES B
Address: 3044 SMILITARYTR
City-St-Zip: LAKE WORTH, FL 33463 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: RICHARDMJOHNSTON

VP

01/04/2005

Electronic Signature of Signing Officer or Director

_____ Date