2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2005
Secretary of State

DOCUMENT# 442408

Entity Name: CORPORATE INSURANCE SERVICES, INC.

Current Principal Place of Business:

5775-B GLENRIDGE DR
SUITE 130
ATLANTA, GA 30328 US

New Principal Place of Business:

Current Mailing Address:

5775-B GLENRIDGE DR
SUITE 130
ATLANTA, GA 30328 US

New Mailing Address:

FEI Number: 59-1502474 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BARTHET, PATRICK
200S BISCAYNE BLVD
STE 1800
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

BARTHET, PATRICK
200 S BISCAYNE BLVD
STE 1800
MIAMI, FL 33131 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: 01/23/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: STD ( ) Delete
Name: DUARTE, THOMAS,
Address: 5143 SANDLEWOOD CT
City-St-Zip: MARIETTA, GA 30068

Title: PD ( ) Delete
Name: MEADOWS, OLIVER W.,
Address: 436 IVY PARK LANE
City-St-Zip: ATLANTA, GA 30342

Title: VD ( ) Delete
Name: POMERANCE, DAVID,
Address: 6779 ROBERTSON SPRINGS RD
City-St-Zip: LOUDON, TN 37744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change ( ) Addition
Name: DUARTE, THOMAS C
Address: 300 KENDEMERE POINTE
City-St-Zip: ROSWELL, GA 30075

Title: PD (X) Change ( ) Addition
Name: MEADOWS, OLIVER W
Address: 436 IVY PARK LANE
City-St-Zip: ATLANTA, GA 30342

Title: VD (X) Change ( ) Addition
Name: POMERANCE, DAVID M
Address: 6779 ROBERTSON SPRINGS RD
City-St-Zip: LOUDON, TN 37744

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: THOMAS C. DUARTE S/T 01/23/2005
Electronic Signature of Signing Officer or Director — Date