

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90237 022 ***150.00

DOCUMENT # 581399 1. Entity Name A INSURANCE CORP.	
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Principal Place of Business 14 WEST 11TH STREET PANAMA CITY, FL 32401	Mailing Address 14 WEST 11TH STREET PANAMA CITY, FL 32401
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DO NOT WRITE IN THIS SPACE

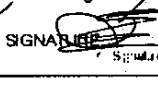


01112006 No Chg-P CR2ED34 (11/05)

4. FBI Number 59-1838118	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FERRELL, BARBARA A. 1025 W 19ST #12D PANAMA CITY, FL 32401	DO NOT WRITE IN THIS SPACE
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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:  _____
(Signature, typed or printed name of registered agent on the face above. (NOTE: Registered Agent signature and address are required.) Date:

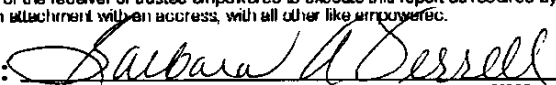
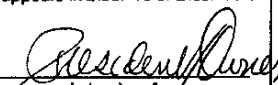
**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution: ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	POST FERRELL, BARBARA A. 14 WEST 11 STREET PANAMA CITY, FL
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 637, 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:  **1-11-06** 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

BARBARA A. Ferrell