

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003795

FILED
Jan 14, 2004
Secretary of State

Entity Name: USG INSURANCE SERVICES, INC.

Current Principal Place of Business:

25800 NORTHWESTERN HIGHWAY, SUITE 1000
SOUTHFIELD, MI 48075

New Principal Place of Business:

25800 NORTHWESTERN HIGHWAY, STE 1000
SOUTHFIELD, MI 48075

Current Mailing Address:

P.O. BOX 222
SOUTHFIELD, MI 480370222

New Mailing Address:

FEI Number: 31-1789473 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORTON, GERALD W
14499 N DALE MABRY RD., STE 215S
TAMPA, FL 33618 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: PD () Delete
Name: HORTON, GERALD W
Address: 14499 N. DALE MABRY RD., STE 215S
City-St-Zip: TAMPA, FL 33618

Title: ST () Delete
Name: HORTON, SUSAN M
Address: 14499 N. DALE MABRY RD., STE 215S
City-St-Zip: TAMPA, FL 33618

Title: AS () Delete
Name: TOMPKINS, A. STUART
Address: 25800 NORTHWESTERN HWY., STE 1000
City-St-Zip: SOUTHFIELD, MI 48075

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: A. STUART TOMPKINS

AS

01/14/2004

Electronic Signature of Signing Officer or Director

Date