2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2006 8:00 am Secretary of State

	ANNUAL	Secretary of State			
1. Entity Nam	MENT # F02000004 HINSURANCE SERVICES, I			05-04-2006 90214 009 ***150.00	
Principal Place of Business 440 E MIDDLEFIELD RD MOUNTAIN VIEW, CA 94043		Mailing Address 440 E MIDDLEFIELD RD MOUNTAIN VIEW, CA 94043		1 JOHNSON 1111 ORING MINEN CORNI CHINI CHINI CHINI CORNI CORNI CORNI CORNI CORNI CINI CINI CINI CINI CINI CINI	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04172006 Chg-P CR2E034 (11/05)	
City & State		City & State		4. FEI Number Applied For 77-0470789 Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent	
			Name		
1203 GOV SUITE 101			Street Address (P.O. Box Number is Not Acceptable)		
TALLAHAS	SSEE, FL 32301				
			City	FL Zip Code	
	named entity submits this statement for ions of registered agent.	the purpose of changing its re	registered agent, or both, in the State of Florida. I am familiar with, and accept		
CICNATURE					
SIGNATURE.	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE.	Registered Agent signatu	re required when reinstating) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Trust Fund Contribu				\$5.00 May Be Added to Fees	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PCD	☐ Delete	TITLE	V □ Change 🔀 Addition	
NAME	LAUER, GARY L		NAME	FAHLMAN, ROBERT L. 440 E. MIDDLEFIELD RD.	
STREET ADDRESS CITY-ST-ZIP	440 E MIDDLEFIELD RD		STREET ADDRESS CITY-ST-ZIP	440 E. MIDDLEFIELD RD.	
	MOUNTAIN VIEW, CA 94043			MOUNTAIN VIEW, CA 94043	
TITLE NAME	V BOREDT É	☐ Delete	TITLE NAME	LACOB, JOSEPH S.	
STREET ADDRESS	HURLEY, ROBERT S 11919 FOUNDATION PLACE, ST	E100		2750 SAND HILL RD.	
CITY-ST-ZIP	GOLD RIVER, CA 95670	2100	CITY-ST-ZIP	MENLO PARK CA 94025	
TITLE	S	☐ Delete	TITLE	D Change DA Addition	
NAME	TELKAMP, BRUCE		NAME	SCHAEPE CHRISTOPHER J	
STREET ADDRESS	440 E MIDDLEFIELD RD		STREET ADDRESS	71 N/ SAND HILL KD.	
CITY-ST-ZIP	MOUNTAIN VIEW, CA 94043		CITY-ST-ZIP	MBNLO PARK CA 44025	
TITLE	T	☐ Delete	TITLE	☐ Change ★ Addition	
NAME STREET ADDRESS	HUIZINGA, STUART M 440 E MIDDLEFIELD RD		NAME STREET ADDRESS	LAPORTE, KATHLEEN 3000 SAND HILL RD., BLOG.3, STE. 170	
CITY-ST-ZIP	MOUNTAIN VIEW, CA 94043		CITY-ST-ZIP	MENLO PARK, CA 94025	
TITLE	D	☐ Delete	TITLE	Change Addition	
NAME	PATEL, VIPOOL M			OUVER, JACK	
STREET ADDRESS	440 E MIDDLEFIELD RD		STREET ADDRESS	700 13TH ST. N.W., STE. 500	
CITY_CT_7IP	MOUNTAINI VIEW CA 04042		CITY_ST_7ID	المراجعة الم	

12. I hereby certify that the information supplied with this filling 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 607, 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

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NAME

Xtut 20.

GOLDBERG, MICHAEL

PESCADERO, CA 94060

STREET ADDRESS 2995 WOODSIDE RD, SUITE 400

Stuart Huizinga /CFO

04.20.06

650-210-3180

☐ Change

☐ Addition