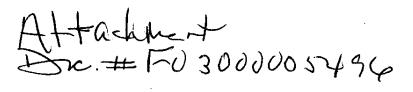
2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Secretary of State DOCUMENT # F03000005496 06-24-2004 90079 004 ***150.00 PEACHTREE WEST INSURANCE BROKERS, INC. Principal Place of Business Mailing Address 74028637 C/O PEACHTREE WEST INSURANCE BROKERS C/O PEACHTREE WEST INSURANCE BROKERS 12301 WILSHIRE BLVD., SUITE 402 12301 WILSHIRE BLVD., SUITE 402 LOS ANGELES, CA 90025 LOS ANGELES, CA 90025 2. Principal Place of Business 3. Mailing Address PO BON 9699 Suite, Apt. #, etc. 06212004 CR2E034 (10/03) 4 FEI Number Applied For City & State City & State 71-0948681 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent - -6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL: 32301-2525 Zip Code City FL 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE PD Delete TITLE Change Change □ Addition NAME KIRK, KEN NAME 4041 N. CENTRAL AVE., SUITE 1500 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PHOENIX, AZ 85012 CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TITLE MORTIMER, RICK NAME NAME STREET ADDRESS STREET ADDRESS 475 S. STATE COLLEGE BLVD. CITY-ST-ZIP CITY-ST-ZIP BREA, CA 92821 ☐ Delete Change ☐ Addition TITLE TITLE MORTIMER, VERNELLE NAME NAME STREET ADDRESS 475 S. STATE COLLEGE BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BREA, CA 92821 ☐ Addition TITLE ☐ Delete TITLE ☐ Change SWANSON, KELLY NAME NAME STREET ADDRESS 4041 N. CENTRAL AVE., SUITE 1500 STREET ADDRESS PHOENIX, AZ 85012 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition RODRIGUEZ, SUSAN M NAME NAME STREET ADDRESS 109 N. "H" STREET STREET ADDRESS CITY-ST-ZIP LOMPOC, CA 33602 CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change TITLE GRAMMIG, LAUREL L NAME NAME STREET ADDRESS 401 E. JACKSON ST., SUITE 1700 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA, FL 33602 12. I hereby certify that the information supplied with this filling does not qualify 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 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, withyall other like empowered.

FILED Jun 24, 2004 8:00 am





June 18, 2004

Division of Corporations PO Box 1500 Tallahassee FL 32302-1500

SUBJECT: 2004 ANNUAL REPORT

Peachtree West Insurance Brokers, Inc. applied for and received name approval in anticipation of doing business in your state.

The young woman who was handling surplus lines and licensing for Peachtree West is no longer with the agency and I have taken over the task.

To date we have not conducted business in the state of Florida and did not received your annual report form. Please note mailing address change.

Enclosed is the 2004 annual report downloaded from your website and necessary fee of \$150.00.

Should you have any questions, you may contact me at (714) 990-4430 or <u>vernelle.mortimer@bbbrea.com</u>.

Thanks,

Vernelle B. Mortimer

Vice President

Enclosure