2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001617

Entity Name: BROWN & BROWN RE, INC.

FILED Mar 06, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
140 BROADWAY, 46TH FLOOR NEW YORK, NY 10005				811 THIRD AVENUE SUITE 1502 NEW YORK, NY 10017			
Current Mailing Address:				New Mailing Address:			
140 BROADWAY, 46TH FLOOR NEW YORK, NY 10005				811 THIRD AVENUE SUITE 1502 NEW YORK, NY 10017			
FEI Number	: 06-1633169	FEI Number Applied For()	FEI Nur	nber Not Appl	icable ()	Certificate of Status E	esired ()
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	lew Registered Age	ent:
1201 HAYS TALLAHAS The above	ATION SERVIC S STREET SSEE, FL 3230 named entity se of Florida.		urpose o	of changing i	ts registered o	ffice or registered aç	gent, or both,
SIGNATU							
	Electror	ic Signature of Registered Age	nt			Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () HENDERSON, 220 S. RIDGEV DAYTONA BEA	VOOD AVE.		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	SEE, FRANK R	LVD., 9TH FLOOR		Title: Name: Address: City-St-Zip:	SEE, FRANK R	Change () Addition NUE; STE. 1502 (10017	
Title: Name: Address: City-St-Zip:	AXT, GEOFFRE	LVD., 9TH FLOOR		Title: Name: Address: City-St-Zip:	AXT, GEOFFRE	NUE; STE. 1502	
Title: Name: Address: City-St-Zip:	GRAMMIG, LAU	N ST., STE. 1700		Title: Name: Address: City-St-Zip:	GRAMMIG, LAU	R., BLVD., STE. 400	
Title: Name: Address: City-St-Zip:	DONEGAN, TH	N ST., STE. 1700		Title: Name: Address: City-St-Zip:	DONEGAN, TH	R., BLVD., STE. 400	
Title: Name: Address: City-St-Zip:	T () WALKER, COR 220 S. RIDGEV DAYTONA BEA	VOOD AVE.		Title: Name: Address: City-St-Zip:	()	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: LAUREL L. GRAMMIG S 03/06/2006