

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F85505

**FILED**  
**Feb 01, 2005**  
**Secretary of State**

**Entity Name:** MERWIN'S INSURANCE CENTER, INC.

**Current Principal Place of Business:**

3426 ST JOHNS AVE  
PALATKA, FL 32177 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. DRAWER 2079  
PALATKA, FL 321782079 US

**New Mailing Address:**

**FEI Number:** 59-2201452      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WEBSTER C MERWIN  
3426 ST. JOHNS AVE  
PALATKA, FL 32177 US

**Name and Address of New Registered Agent:**

MERWIN, WEBSTER C MR.  
3426 ST. JOHNS AVE  
PALATKA, FL 32177 US

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: WEBSTER MERWIN

02/01/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MERWIN, WEBSTER C  
Address: 3426 ST JOHNS AVE  
City-St-Zip: PALATKA, FL 32177

Title: SD ( ) Delete  
Name: MERWIN, CYNTHIA J  
Address: 3426 ST JOHNS AVE  
City-St-Zip: PALATKA, FL 32177

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MERWIN, WEBSTER C MR.  
Address: 3426 ST JOHNS AVE  
City-St-Zip: PALATKA, FL 32177

Title: SD (X) Change ( ) Addition  
Name: MERWIN, CYNTHIA J MRS.  
Address: 3426 ST JOHNS AVE  
City-St-Zip: PALATKA, FL 32177

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: WEBSTER MERWIN

P

02/01/2005

Electronic Signature of Signing Officer or Director

Date