

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000004799

Entity Name: IGIC MANAGEMENT COMPANY

FILED
Feb 12, 2004
Secretary of State

Current Principal Place of Business:

3645 CORTEZ RD. W.
#150
BRADENTON, FL 34210

Current Mailing Address:

3645 CORTEZ RD. W.
#150
BRADENTON, FL 34210

New Principal Place of Business:

3645 CORTEZ RD. W.
#140
BRADENTON, FL 34210

New Mailing Address:

3645 CORTEZ RD. W.
#140
BRADENTON, FL 34210

FEI Number: 47-0778833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRIDGEN, GARY L
4300 LAKESIDE DR.
#13
JACKSONVILLE, FL 32210 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: PCEO () Delete
Name: KOYEN, BERNARD L
Address: 6101 34TH STREET W. UNIT 254
City-St-Zip: BRADENTON, FL 34210

Title: VS () Delete
Name: KOYEN, CONNIE S
Address: 6101 34TH STREET W. UNIT 254
City-St-Zip: BRADENTON, FL 34210

Title: CFOV () Delete
Name: PRIDGEN, GARY L
Address: 4300 LAKESIDE DR., #13
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: MULLER, RICHARD
Address: 505 S 93RD AVE
City-St-Zip: OMAHA, NE 68114

Title: D () Delete
Name: JOST, STEPHEN
Address: 6200 S TROY DRIVE SUITE 210
City-St-Zip: ENGLEWOOD, CO 80111

Title: D () Delete
Name: SKAER, ROGER D D.D.S.
Address: 7210 CEDARIDGE CIRCLE
City-St-Zip: WICHITA, KS 67226

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: KOYEN, BERNARD L
Address: 6101 34TH STREET W. UNIT 25H
City-St-Zip: BRADENTON, FL 34210

Title: VS (X) Change () Addition
Name: KOYEN, CONNIE S
Address: 6101 34TH STREET W. UNIT 25H
City-St-Zip: BRADENTON, FL 34210

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

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: CONNIE S. KOYEN

VS

02/12/2004

Electronic Signature of Signing Officer or Director

Date