## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F99000005582

FILED Jan 05, 2005 Secretary of State

Entity Name: CENTERSTONE INSURANCE AND FINANCIAL SERVICES, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
4851 LBJ <u>I</u> DALLAS, <sup>-</sup>	FREEWAY, SL TX 75244	JITE 1100			
Current Mailing Address:			New Maili	ng Address:	
4851 LBJ <u>I</u> DALLAS, <sup>-</sup>	FREEWAY, SL TX 75244	JITE 1100			
FEI Number	: 95-4018229	FEI Number Applied For()	FEI Number Not App	licable ( ) Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
1200 SOU	ORATION SYS TH PINE ISLAI ION, FL 33324	ND ROAD			
	named entity se of Florida.	submits this statement for the p	ourpose of changing i	ts registered office or registered agent, or both,	
SIGNATUI					
	Electror	ic Signature of Registered Age	ent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ( ).			
OFFICER	S AND DIREC	TORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DIFIORE, BERI	EWAY, SUITE 1100	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ROBERTSON,	EWAY, SUITE 1100	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LEWIS, JEFFR	EWAY, SUITE 1100	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ANCTIL, MATT	Delete EWAY, SUITE 1100 5244	Title: Name: Address: City-St-Zip:	VPS (X) Change ( ) Addition GUFFEY, SCOTT 4851 LBJ FREEWAY, SUITE 1100 DALLAS, TX 75244	
Title: Name:	KIRKSEY, T. S	Delete EWAY, SUITE 1100 5244	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Address: City-St-Zip:					

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: JEFFRY LEWIS AS 01/05/2005