

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G14541

FILED
Jan 30, 2005
Secretary of State

Entity Name: PARLIN INSURANCE AGENCY OF NAPLES, INC.

Current Principal Place of Business:

2400 TAMIAMI TRAIL NO
SUITE 401
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

% DIANNA DEE PARLIN
P O BOX 9289
NAPLES, FL 33941 US

New Mailing Address:

% DIANNA DEE PARLIN
4265 UTE COURT
ESTERO, FL 33928 US

FEI Number: 59-2237813

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARLIN, DIANNA DEE
2400 TAMIAMI TRL
STE 401
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

PARLIN, DIANNA DEE
4265 UTE COURT
ESTERO, FL 33928 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: DIANNA DEE PARLIN

01/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PARLIN, ROGER M,
Address: 4265 UTE COURT
City-St-Zip: ESTERO, FL

Title: DP () Delete
Name: PARLIN, DIANNA DEE,
Address: 4265 UTE COURT
City-St-Zip: ESTERO, FL

Title: ST () Delete
Name: PARLIN, DEEDRA
Address: 4265 UTE COURT
City-St-Zip: ESTERO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ST (X) Change () Addition
Name: WILLIAMS, DEEDRA
Address: 18330 OSTEGO DRIVE
City-St-Zip: FORT MYERS, FL 33912

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: DIANNA DEE PARLIN

PRES

01/30/2005

Electronic Signature of Signing Officer or Director

Date