2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006
Secretary of State

DOCUMENT# G18924

Entity Name: ACCREDITED INSURANCE SERVICES, INC.

Current Principal Place of Business:

6800 SR 37TH N
MULBERRY, FL 33860 US

New Principal Place of Business:

6800 STATE ROAD 37 NORTH
MULBERRY, FL 33860 US

Current Mailing Address:

6800 SR 37 N
MULBERRY, FL 33860 US

New Mailing Address:

6800 STATE ROAD 37 NORTH
MULBERRY, FL 33860 US

FEI Number: 59-2437527 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUGHES, WILLIAM L.
6740 BROKEN ARROW TRAIL SOUTH
LAKELAND, FL 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: DP ( ) Delete
Name: HUGHES, WILLIAM L.,
Address: 6740 BROKEN ARROW TR. S.
City-St-Zip: LAKELAND, FL

Title: D ( ) Delete
Name: HUGHES, PHILLIP D.,
Address: 6800 SR 37 N
City-St-Zip: MULBERRY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: HUGHES, WILLIAM L.,
Address: 6740 BROKEN ARROW TR. S.
City-St-Zip: LAKELAND, FL 33813 US

Title: D (X) Change ( ) Addition
Name: HUGHES, PHILLIP D.,
Address: 92 WOOD HALL DRIVE
City-St-Zip: MULBERRY, FL 33860 US

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: PHILLIP D. HUGHES D 02/13/2006

Electronic Signature of Signing Officer or Director Date