

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G18924

**FILED**  
**Jan 28, 2008**  
**Secretary of State**

**Entity Name:** ACCREDITED INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

3240 FLIGHTLINE DRIVE  
LAKELAND, FL 33811 US

**New Principal Place of Business:**

6734 BROKEN ARROW TRAIL SOUTH  
LAKELAND, FL 33813 US

**Current Mailing Address:**

3240 FLIGHTLINE DRIVE  
LAKELAND, FL 33811 US

**New Mailing Address:**

6734 BROKEN ARROW TRAIL SOUTH  
LAKELAND, FL 33813

**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:**

WILLIAM L., HUGHES PRES.  
6734 BROKEN ARROW TRAIL SOUTH  
LAKELAND, FL 33813 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: WILLIAM L. HUGHES

01/28/2008

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

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

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

Title: P (X) Change ( ) Addition  
Name: WILLIAM L., HUGHES PRES  
Address: 6734 BROKEN ARROW TR. S.  
City-St-Zip: LAKELAND, FL 33813 US

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM L. HUGHES

PRES

01/28/2008

Electronic Signature of Signing Officer or Director

Date