

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H31074

FILED
Apr 28, 2004
Secretary of State

Entity Name: INSURANCE SOLUTIONS, INC.

Current Principal Place of Business:

7458 CAMERON DRIVE
LARKSPUR, CO 80118 US

New Principal Place of Business:

1647 PARK STREET
UNIT B
CASTLE ROCK, CO 80109 US

Current Mailing Address:

7458 CAMERON DRIVE
LARKSPUR, CO 80118 US

New Mailing Address:

1647 PARK STREET
UNIT B
CASTLE ROCK, CO 80109 US

FEI Number: 59-2469332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KING, LEWIS P
5442 RIVER TRL RD S.
JACKSONVILLE, FL 32227 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: P () Delete
Name: WHITNEY RICK J,
Address: 7458 CAMERON DRIVE
City-St-Zip: LARKSPUR, CO 80118

Title: TS () Delete
Name: WHITNEY MARY,
Address: 7458 CAMERON DRIVE
City-St-Zip: LARKSPUR, CO 80118

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MARY WHITNEY

TS

04/28/2004

Electronic Signature of Signing Officer or Director

Date