

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# H52260

FILED
May 31, 2006
Secretary of State

Entity Name: VICTORY INSURANCE OF WINTER HAVEN, INC.

Current Principal Place of Business:

116 W CENTRAL AVE.
WINTER HAVEN, FL 33880 US

New Principal Place of Business:

116 W CENTRAL AVENUE
WINTER HAVEN, FL 33880 US

Current Mailing Address:

116 WEST CENTRAL AVE.
WINTER HAVEN, FL 33880 US

New Mailing Address:

116 WEST CENTRAL AVENUE
WINTER HAVEN, FL 33880 US

FEI Number: 59-2522575

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISHER, MERRILLEE
107 CONNIE LEE CT
LAKELAND, FL 33809 US

Name and Address of New Registered Agent:

FIKE, JENNIFER
116 WEST CENTRAL AVENUE
WINTER HAVEN, FL 33880 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: JENNIFER FIKE

05/31/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FISHER, GEORGE,
Address: 107 CONNIE LEE CT
City-St-Zip: LAKELAND, FL

Title: ST () Delete
Name: FISHER, MERRILLEE,
Address: 107 CONNIE LEE CT
City-St-Zip: LAKELAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FIKE, JENNIFER,
Address: 116 WEST CENTRAL AVENUE
City-St-Zip: WINTER HAVEN, FL 33880 US

Title: ST (X) Change () Addition
Name: FIKE, JOHN,
Address: 116 WEST CENTRAL AVENUE
City-St-Zip: WINTER HAVEN, FL 33880 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: JENNIFER FIKE

P

05/31/2006

Electronic Signature of Signing Officer or Director

Date