

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K96686

FILED  
Jan 05, 2004  
Secretary of State

Entity Name: CAROL LARSEN INSURANCE AGENCY INC.

**Current Principal Place of Business:**

1973 S. MILITARY TRAIL  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

675 ROYAL PALM BEACH BL.  
SUITE #135  
ROYAL PALM BEACH, FL 33411

**Current Mailing Address:**

1973 S. MILITARY TRAIL  
WEST PALM BEACH, FL 33415

**New Mailing Address:**

675 ROYAL PALM BEACH BLVD.  
SUITE #135  
ROYAL PALM BEACH, FL 33411

FEI Number: 65-0678811

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LARSEN, CAROL J  
1973 S. MILITARY TRAIL  
WEST PALM BEACH, FL 33415 US

**Name and Address of New Registered Agent:**

LARSEN, CAROL J  
675 ROYAL PALM BEACH BLVD.  
SUITE #135  
ROYAL PALM BEACH, FL 33411 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: CAROL J LARSEN

01/05/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LARSEN, CAROL J  
Address: 1973 S. MILITARY TRAIL  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VD ( ) Delete  
Name: BRODIE, SANDY,  
Address: 1973 S. MILITARY TRAIL  
City-St-Zip: LAKE WORTH, FL 33415

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

Title: PD (X) Change ( ) Addition  
Name: LARSEN, CAROL J  
Address: 675 ROYAL PALM BEACH BLVD.#135  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: VD (X) Change ( ) Addition  
Name: BRODIE, SANDY,  
Address: 675 ROYAL PALM BEACH BLVD. #135  
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: CAROL J LARSEN

PD

01/05/2004

Electronic Signature of Signing Officer or Director

Date