2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L27101

FILED Jan 10, 2006 Secretary of State

Entity Name: PROFESSIONAL INSURANCE CONSULTING SERVICES, INC.

Current Principal Place of Business: New	Principal Place of Business:
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1882 CAPITAL CIR NE 249 EAST VIRGINIA

SUITE 201 TALLAHASSEE, FL 32301 US TALLAHASSEE, FL 32308 US

Current Mailing Address: New Mailing Address:

1882 CAPITAL CIR NE 249 EAST VIRGINIA

SUITE 201 TALLAHASSEE, FL 32301 US TALLAHASSEE, FL 32308 US

FEI Number: 59-2975231 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GODWIN, WILLIAM B

1882 CAPITAL CIRCLE NE

STE 201

GODWIN, WILLIAM B

249 EAST VIRGINIA

TALLAHASSEE, FL 32301 US

STE 201 TALLAHASSEE, FL 32301 US TALLAHASSEE, FL 32301 U

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: 01/10/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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

Title: P () Delete Title: () Change () Addition

Name:GODWIN, WILLIAM BName:Address:7235 HEARTLAND CRICLEAddress:City-St-Zip:TALLAHASSEE, FLCity-St-Zip:

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: WILLIAM B GODWIN PRES 01/10/2006