

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000000088

Entity Name: INSIGHT STRATEGIES, INC.

FILED
Mar 11, 2007
Secretary of State

Current Principal Place of Business:

15550 MCGREGOR BLVD
SUITE 104
FT. MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

15550 MCGREGOR BLVD
SUITE 104
FT. MYERS, FL 33908

New Mailing Address:

FEI Number: 65-0973315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUSHING, MARIANNE VP
15550 MCGREGOR BLVD
STE 104
FT. MYERS, FL 33908 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: PS () Delete
Name: POWERS, KIMBERLY
Address: 11716 MOHAGANY RUN
City-St-Zip: FORT MYERS, FL 33913

Title: VT () Delete
Name: CUSHING, MARIANNE
Address: 12766 VISTA PINE CIRCLE
City-St-Zip: FORT MYERS, FL 33913

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: POWERS, KIMBERLY
Address: 12081 WEDGE DRIVE
City-St-Zip: FORT MYERS, FL 33913

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 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: KIMBERLY POWERS

PS

03/11/2007

Electronic Signature of Signing Officer or Director

Date