

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000053354

FILED
Apr 30, 2004
Secretary of State

Entity Name: INSURANCE BY CINDY, INC.

Current Principal Place of Business:

6283 109TH TERRACE NORTH
PINELLAS PARK, FL 33782

New Principal Place of Business:

Current Mailing Address:

6283 109TH TERRACE NORTH
PINELLAS PARK, FL 33782

New Mailing Address:

FEI Number: 59-5645840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODWORTH, SHAWN M
1909 DORMICONE CIRCLE N
SAINT PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

WOODWORTH, SHAWN M
1909 DORMIEONE CIRCLE N
SAINT PETERSBURG, FL 33710 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: SHAWN WOODWORTH

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: MODESITT, CINDY L
Address: 6283 109TH TERRACE NORTH
City-St-Zip: PINELLAS PARK, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CINDY MODESITT

PSTD

04/30/2004

Electronic Signature of Signing Officer or Director

Date