

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000063018

FILED
Jan 18, 2005
Secretary of State

Entity Name: SILVESTER-CAUSEY INSURANCE GROUP, INC.

Current Principal Place of Business:

1800 FOREST HILL BV
B9
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

1800 FOREST HILL BV
B9
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number: 65-1019975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVESTER, STEVEN E
769 HARBOUR ISLES PLACE
NORTH PALM BEACH, FL 33408 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: D () Delete
Name: SILVESTER, STEVEN E
Address: 769 HARBOUR ISLES PLACE
City-St-Zip: NORTH PALM BEACH, FL 33408

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: STEVEN SILVESTER

PRES

01/18/2005

Electronic Signature of Signing Officer or Director

Date