2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000063411

Entity Name: CABELL INSURANCE & FINANCIAL SERVICES, INC.

FILED Apr 20, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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11 S 7TH ST 1699 SOUTH 14TH STREET FERNANDINA BEACH, FL 32034

SUITE 6

FERNANDINA BEACH, FL 32034

Current Mailing Address: New Mailing Address:

1699 SOUTH 14TH STREET 11 S 7TH ST FERNANDINA BEACH, FL 32034

SUITE 6

FERNANDINA BEACH, FL 32034

FEI Number: 59-3660629 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:

TOMASSETTI, JEFFREY 406 ASH ST

FERNANDINA BEACH, FL 32034 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: PRFS (X) Change () Addition

CABELL, DAVID M Name: Name: CABELL, DAVID M

11 S 7TH ST 1699 SOUTH 14 STREET STE 6 Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: FERNANDINA BEACH, FL 32034

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: DAVID M CABELL **PRES** 04/20/2006