2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 29, 2005
Secretary of State

DOCUMENT# P00000067219

Entity Name: CONSOLIDATED INSURANCE MARKETING, INC

Current Principal Place of Business:

5300 W. CYPRESS ST.
SUITE 130
TAMPA, FL 33607

New Principal Place of Business:

3507 E. FRONTAGE ROAD
SUITE 190
TAMPA, FL 33607 US

Current Mailing Address:

5300 W. CYPRESS ST.
SUITE 130
TAMPA, FL 33607

New Mailing Address:

3507 E. FRONTAGE ROAD
SUITE 190
TAMPA, FL 33607 US

FEI Number: 59-3659441 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OSBORNE, CHARLES
5300 W CYPRESS ST #130
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

OSBORNE, CHARLES C
3507 E. FRONTAGE ROAD
SUITE 190
TAMPA, FL 33607 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: CHARLES C OSBORNE 06/29/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: OSBORNE, CHARLES
Address: 5300 W. CYPRESS ST., SUITE 130
City-St-Zip: TAMPA, FL 33607

Title: VP ( ) Delete
Name: OSBORNE, AMY D
Address: 5300 W. CYPRESS ST., SUITE 130
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: OSBORNE, CHARLES C
Address: 3507 E. FRONTAGE ROAD, STE 190
City-St-Zip: TAMPA, FL 33607 US

Title: VP (X) Change ( ) Addition
Name: OSBORNE, AMY D
Address: 3507 E. FRONTAGE ROAD, STE 190
City-St-Zip: TAMPA, FL 33607 US

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: CHARLES C OSBORNE P 06/29/2005
Electronic Signature of Signing Officer or Director Date