

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000083819

Entity Name: CORAL CAY INSURANCE, INC.

FILED
Jun 20, 2005
Secretary of State

Current Principal Place of Business:

875 SE 47TH TERRACE
STE 4
CAPE CORAL, FL 33904

Current Mailing Address:

875 SE 47TH TERRACE
STE 4
CAPE CORAL, FL 33904

New Principal Place of Business:

6020 DREXEL LANE
901
FORT MYERS, FL 33919

New Mailing Address:

6020 DREXEL LANE
901
FOERT MYERS, FL 33919

FEI Number: 65-1036953

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PREWETT, DANIEL L
5777 BENEVA ROAD SOUTH
SARASOTA, FL 34233 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

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: CEO () Delete
Name: BELL, ELIZABETH A
Address: 1 NW 39TH AVENUE
City-St-Zip: CAPE CORAL, FL 33993

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: BELL, WILLIAM J MR
Address: 6020 DREXEL LANE 901
City-St-Zip: FOERT MYERS, FL 33919

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: WILLIAM J BELL

CEO

06/20/2005

Electronic Signature of Signing Officer or Director

Date