

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000094347

FILED
Apr 30, 2005
Secretary of State

Entity Name: ACCURATE INSURANCE, INC.

Current Principal Place of Business:

1002 S. US #1
FORT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

1002 S. US #1
FORT PIERCE, FL 34950

New Mailing Address:

FEI Number: 59-3675643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLWOOD, DIANA M
3327 HATCHER STREET
FT. PIERCE, FL 34981 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: P () Delete
Name: ELLWOOD, DIANA
Address: 3327 HATCHER STREET
City-St-Zip: FT. PIERCE, FL 34981

Title: V (X) Delete
Name: CORDARY, GEORGETTE
Address: 1510 CORONADO AVENUE
City-St-Zip: FT. PIERCE, FL 34982

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DIANA ELLWOOD

PRES

04/30/2005

Electronic Signature of Signing Officer or Director

Date