

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000097205

FILED
Apr 23, 2006
Secretary of State

Entity Name: VICKERY INSURANCE GROUP, INC.

Current Principal Place of Business:

142 W SR 434
WINTER SPRINGS, FL 32708

New Principal Place of Business:

995 SR 434 NORTH
SUITE 307
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

305 SPRING LAKE HILLS DR
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 59-3674863 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VICKERY, MARK
305 SPRING LAKE HILLS DR
ALTAMONTE SPRINGS, FL 32714 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: VICKERY, MARK
Address: 305 SPRING LAKE HILLS DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D () Delete
Name: VICKERY, MICHELLE
Address: 305 SPRING LAKE HILLS DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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 Chapter 119, 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: MARK VICKERY

D

04/23/2006

Electronic Signature of Signing Officer or Director

Date