FILED
May 22, 2007 8:00 am
Secretary of State
04-26-2007 90181 016 ***150.00

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000098352

1. Entity Name
INSIGHTS SERVICE CORPORATION

Principal Place of Business	Mailing Address
1501 9TH AVENUE EAST TAMPA, FL 33605	1501 9TH AVENUE EAST TAMPA, FL 33605

04172007 Chg-P CR2E034 (12/06)

(2) Principal Place of Business - No P.O. Box #	(3) Mailing Address
14742 Lake Magdalene Cir	14742 Lake Magdalene Cir
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: TPA, FL	City & State: Tampa FL
Zip: 33613 Country: Hillsborough	Zip: 33613 Country: USA

4. FEI Number: 59-3677008 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BROWN, CHRISTOPHER H. G 1501 9TH AVENUE EAST TAMPA, FL 33605	Name: CHRISTOPHER Brown Street Address (P.O. Box Number is Not Acceptable): 14742 Lake Magdalene Cir City: Tampa FL Zip Code: 33613

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ CHRISTOPHER Brown 5.16.2007
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BROWN, CHRISTOPHER H. G 1501 9TH AVENUE EAST TAMPA, FL 33605	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 14742 Lake Magdalene Cir Tampa, FL 33613
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BROWN, DENISE 1501 9TH AVENUE EAST TAMPA, FL 33605	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 14742 Lake Magdalene Cir Tampa, FL 33613
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUSSELL, RICHARD D 3201 BAY VISTA AVENUE TAMPA, FL 33611	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ CHRISTOPHER Brown 5.16.2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #