

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000105795

Entity Name: FLORIDA IPSI, INC.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

STATE FARM INSURANCE COMPANIES
7401 CYPRESS GARDENS BLVD
WINTER HAVEN, FL 33888

New Principal Place of Business:

Current Mailing Address:

STATE FARM INSURANCE COMPANIES
7401 CYPRESS GARDENS BLVD
WINTER HAVEN, FL 33888

New Mailing Address:

FEI Number: 59-3680842

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JIM
7401 CYPRESS GARDENS BLVD
WINTER HAVEN, FL 33888 US

Name and Address of New Registered Agent:

FORMUSA, JOE
7401 CYPRESS GARDENS BLVD
WINTER HAVEN, FL 33888 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: JOE FORMUSA

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MACNIVEN, DONNA
Address: 1013 GRAND ISLE DRIVE
City-St-Zip: NAPLES, FL 341083324

Title: D () Delete
Name: JONES, JOHN PAUL
Address: 3300 N UNIVERSITY DR, STE 250/275
City-St-Zip: CORAL SPRINGS, FL 330654126

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: O () Change (X) Addition
Name: RIO, VINCENT J AST SEC
Address: 315 S. CALHOUN ST.
City-St-Zip: TALLHASSEE, FL 32301 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: VINCENT J RIO

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04/30/2005

Electronic Signature of Signing Officer or Director

Date