

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000043378

Entity Name: SENIOR INSURANCE SERVICES, INC.

FILED  
Mar 10, 2005  
Secretary of State

**Current Principal Place of Business:**

4390 FEDERAL HIGHWAY SUITE 208  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

4390 FEDERAL HIGHWAY SUITE 208  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

FEI Number: 65-1109906      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GERBER, JACK B  
9400 SOUTH DADELAND BLVD. PH 5  
MIAMI, FL 33156 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: PD ( ) Delete  
Name: GOLDMAN, JEAN  
Address: 4390 FEDERAL HIGHWAY SUITE 208  
City-St-Zip: FORT LAUDERDALE, FL 33308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify 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: JEAN GOLDMAN

PD

03/10/2005

Electronic Signature of Signing Officer or Director

Date