

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000068829

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: PRECISION UNDERWRITERS, INC.

**Current Principal Place of Business:**

2450 MAITLAND CENTER PARKWAY  
SUITE 300  
MAITLAND, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2106  
WINTER PARK, FL 32790

**New Mailing Address:**

FEI Number: 59-3751601      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LUND, L. ALAN  
1780 N. KROME AVE.  
HOMESTEAD, FL 33030      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: JONES, THOMAS R JR  
Address: 17950 SW 285TH STREET  
City-St-Zip: HOMESTEAD, FL 33030

Title: D      ( ) Delete  
Name: LUND, L. ALAN  
Address: 1780 N. KROME AVE  
City-St-Zip: HOMESTEAD, FL 33030

Title: D      ( ) Delete  
Name: NENEZIAN, GEORGE  
Address: 7000 ABERDEEN WAY  
City-St-Zip: MIAMI LAKES, FL 33014

Title: D      ( ) Delete  
Name: STINSON, THOMAS L  
Address: 4438 LITTLE WATER STREET  
City-St-Zip: ORLANDO, FL 32817

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

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

Title: D      ( ) Change (X) Addition  
Name: SANDERS, WILLIAM T  
Address: 1622 EAGLE NEST CIR  
City-St-Zip: WINTER SPRINGS, FL 32708

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: THOMAS L. STINSON

D

04/29/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date