## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000073634

City-St-Zip:

PALM CITY, FL 34991 US

Entity Name: 4 CORNERS INSURANCE INC.

FILED Mar 14, 2005 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
110 POLO DAVENPO	PARK BLVD, I DRT, FL 33897	EAST US				
Current Mailing Address:			New Mailing Address:			
PO BOX 1 CLERMON	37344 NT, FL 34713	US				
FEI Number: 59-3732255		FEI Number Applied For ( )	FEI Number Not Applicable ( )		Certificate of Status Desired ( )	
Name and	l Address of C	urrent Registered Agent:	Name and	Address o	f New Registered Agent:	
4 CORNE PO BOX 1 CLERMON		US				
	named entity s e of Florida.	submits this statement for the	purpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATUI	RE:					
		ic Signature of Registered Ag	ent		Date	
Election Cai	mpaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR			
Title: Name: Address: City-St-Zip:	CEO () PALANTI, MICH PO BOX 13734 CLERMONT, FL	4	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () PALANTI, SHAR PO BOX 13734 CLERMONT, FL	4	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TR () PALANTI, MARC 137 HAZEL NUT DAVENPORT, F	COURT	Title: Name: Address: City-St-Zip:	PALANTI, MA PO BOX 137		
Title: Name: Address:	SEC () PALANTI, JUDIT PO BOX 164	Delete H A	Title: Name: Address:	SEC PALANTI, JU 137344	(X) Change()Addition IDITH A	

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.

City-St-Zip: CLERMONT, FL 34713 US

SIGNATURE: MICHAEL PALANTI CEO 03/14/2005