2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000096424

1. Entity Name
INSIGHT CREATIVE GROUP, INC.

Principal Place of Business	Mailing Address
6656 TAEDA DRIVE	6656 TAEDA DRIVE
SARASOTA, FL 34241	SARASOTA, FL 34241

DO NOT WRITE IN THIS SPACE

02122004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-3752702	Not Applicable

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

6. Name and Address of Current Registered Agent

VOIGT, STEPHEN F
2042 BEE RIDGE ROAD
SARASOTA, FL 34239

DO NOT WRITE IN THIS SPACE

6. 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_____   DATE_____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

II00000052245
02/16/04--90004--004   150.75

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	COURY, ELIZABETH
STREET ADDRESS	6656 TAEDA DRIVE
CITY-ST-ZIP	SARASOTA, FL 34241

TITLE	VP
NAME	COURY, JAMES F
STREET ADDRESS	6656 TAEDA DRIVE
CITY-ST-ZIP	SARASOTA, FL 34241

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 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: _Elizabeth B. Coury_   _2-11-04_   _941-925-4070_
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #