

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000007257

FILED
Apr 30, 2006
Secretary of State

Entity Name: RAYMOND J. ACKERMAN INSURANCE, INC.

Current Principal Place of Business:

2915 PADDOCK RD
WESTON, FL 333313607

New Principal Place of Business:

16725 BERKSHIRE COURT
SOUTHWEST RANCHES, FL 33331

Current Mailing Address:

2915 PADDOCK RD
WESTON, FL 333313607

New Mailing Address:

16725 BERKSHIRE COURT
S.W. RANCHES, FL 33331

FEI Number: 80-0029682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACKERMAN, RAYMOND J
2915 PADDOCK RD
WESTON, FL 333313607 US

Name and Address of New Registered Agent:

ACKERMAN, RAYMOND J
16725 BERKSHIRE COURT
S.W RANCHES, FL 33331 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: _____

Electronic Signature of Registered Agent

04/30/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: ACKERMAN, RAYMOND J
Address: 2915 PADDOCK RD
City-St-Zip: WESTON, FL 333313607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: ACKERMAN, RAYMOND J
Address: 16725 BERKSHIRE COURT
City-St-Zip: S.W RANCHES, FL 33331

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: RAYMOND J ACKERMAN

PRES

04/30/2006

Electronic Signature of Signing Officer or Director

Date