

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000010608

Entity Name: NEW FLORIDA INSURANCE INC

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

4215 GREEN FORESTWAY
BOYNTON BEACH, FL 33436

New Principal Place of Business:

2228 N CONGRESS AVE
BOYNTON BEACH, FL 33426

Current Mailing Address:

4215 GREEN FORESTWAY
BOYNTON BEACH, FL 33436

New Mailing Address:

2228 N CONGRESS AVE
BOYNTON BEACH, FL 33426

FEI Number: 03-0381055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUMAR, ASHOK
4215 GREEN FORESTWAY
BOYNTON BEACH, FL 33436 US

Name and Address of New Registered Agent:

KUMAR, ASHOK
2228 N CONGRESS AVE
BOYNTON BEACH, FL 33426 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: ASHOK KUMAR

04/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KUMAR, ASHOK
Address: 4215 GREEN FOREST WAY
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KUMAR, ASHOK
Address: 2228 N CONGRESS AVE
City-St-Zip: BOYNTON BEACH, FL 33426

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: ASHOK KUMAR

D

04/27/2005

Electronic Signature of Signing Officer or Director

Date