

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000013527

FILED
Mar 31, 2006
Secretary of State

Entity Name: DITTMAN INSURANCE GROUP, INC.

Current Principal Place of Business:

101 FEDERAL PLACE.
STE. 101
TARPON SPRINGS, FL 34688

New Principal Place of Business:

210 S. PINELLAS AVE
SUITE 195
TARPON SPRINGS, FL 34689

Current Mailing Address:

4422 SERENITY TRL.
PALM HARBOR, FL 34685

New Mailing Address:

FEI Number: 61-1403766 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOVELACE, WILLIAM K ESQ
401 S. LINCOLN AVE.
CLEARWATER, FL 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: DITTMAN, JENNIFER L
Address: 4422 SERENITY TRL.
City-St-Zip: PALM HARBOR, FL 34685

Title: D () Delete
Name: DITTMAN, DOUGLAS F
Address: 4422 SERENITY TRL.
City-St-Zip: PALM HARBOR, FL 34685

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DOUGLAS DITTMAN

D

03/31/2006

Electronic Signature of Signing Officer or Director

Date