2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# P02000069017

Entity Name: INSURANCE SERVICE PROVIDERS, INC.

Current Principal Place of Business:

13014 N DALE MABRY HWY #225
TAMPA, FL 33618

New Principal Place of Business:

5332 NUTCRAKER CIR
LAND O LAKES, FL 34639

Current Mailing Address:

13014 N DALE MABRY HWY #225
TAMPA, FL 33618

New Mailing Address:

5332 NUTCRAKER CIR
LAND O LAKES, FL 34639

FEI Number: 02-0620195 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FERRARO, RICHARD
13014 N DALE MABRY HWY #225
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

FERRARO, RICHARD
5332 NUTCRAKER CIR
LAND O LAKES, FL 34639 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: RICHARD FERRARO 04/28/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: FERRARO, RICHARD
Address: 5332 NUTCRACKER CIR
City-St-Zip: LAND O LAKES, FL 34639

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RICHARD FERRARO PD 04/28/2006
Electronic Signature of Signing Officer or Director Date