

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000125496

Entity Name: FIDELITY INSURANCE GROUP, INC.

FILED  
Apr 21, 2005  
Secretary of State

## Current Principal Place of Business:

1855 WELLS RD  
SUITE 6  
ORANGE PARK, FL 32073

## New Principal Place of Business:

## Current Mailing Address:

655 CHARLES PINCKNEY STREET  
ORANGE PARK, FL 32073

## New Mailing Address:

1855 WELLS RD  
SUITE 6  
ORANGE PARK, FL 32073

FEI Number: 03-0493709

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HENDRICKS, BRIAN  
655 CHARLES PINCKNEY STREET  
ORANGE PARK, FL 32073 US

## Name and Address of New Registered Agent:

HENDRICKS, BRIAN  
486 MONTEREY PARKWAY  
ORANGE PARK, FL 32073 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: BRIAN HENDRICKS

04/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HENDRICKS, BRIAN  
Address: 655 CHARLES PINCKNEY STREET  
City-St-Zip: ORANGE PARK, FL 32073

Title: VP ( ) Delete  
Name: HENDRICKS, BRIAN  
Address: 655 CHARLES PINCKNEY STREET  
City-St-Zip: ORANGE PARK, FL 32073

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HENDRICKS, BRIAN  
Address: 486 MONTEREY PARKWAY  
City-St-Zip: ORANGE PARK, FL 32073

Title: VP (X) Change ( ) Addition  
Name: HENDRICKS, BRIAN  
Address: 486 MONTEREY PARKWAY  
City-St-Zip: ORANGE PARK, FL 32073

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: BRIAN HENDRICKS

PRES

04/21/2005

Electronic Signature of Signing Officer or Director

Date