


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 21, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000001743 1. Entity Name MEEK INSURANCE, INC.	
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Principal Place of Business 909 NAPLES DR. ORLANDO, FL 32804	Mailing Address 909 NAPLES DR. ORLANDO, FL 32804
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DO NOT WRITE IN THIS SPACE



05262005 No Chg-P CR2E034 (10/03)

4. FEI Number 56-2452960	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MEEK, COURTNEY 909 NAPLES DR. ORLANDO, FL 32804
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD MEEK, COURTNEY 909 NAPLES DR. ORLANDO, FL 32804
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06/21/05-80001-002 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  COURTNEY MEEK	6-17-05	321-202 0767
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>