## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000003290

Entity Name: FLORIDA PREFERRED PROPERTY INSURANCE COMPANY

FILED Mar 14, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
302 KNIGH	VO HARBOUR PLACE 2 KNIGHTS RUN AVENUE, SUITE 700 MPA, FL 33602				
Current Ma	Current Mailing Address:			ng Address:	
	TS RUN AVEN	UE, SUITE 700			
FEI Number:	16-1641087	FEI Number Applied For ( ) FEI Num	nber Not Applic	licable ( ) Certificate of Status Desired ( )	
Name and	Address of Cu	rrent Registered Agent:	Name and	Address of New Registered Agent:	
CHIEF FINANCIAL OFFICER 302 KNIGHTS RUN AVENUE SUITE 700 TAMPA, FL 33602 US					
The above r in the State		bmits this statement for the purpose o	f changing its	its registered office or registered agent, or both,	
SIGNATUR	E:				
	Electronic	Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS	AND DIRECT	ORS:	ADDITIONS	IS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	WURDEMAN, JAI	IN AVENUE, STE. 700	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	POE, WILLIAM F	IN AVENUE, STE. 700	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MEDER, JAN J	Delete IN AVENUE, STE. 700 12	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition POE, WILLIAM F SR 302 KNIGHTS RUN AVENUE, STE. 700 TAMPA, FL 33602	
Title: Name: Address: City-St-Zip:	D () E SMITH, KEREN P 68 LADOGA TAMPA, FL 3351		Title: Name: Address: City-St-Zip:	TD (X) Change ( ) Addition POE, CHARLES E 302 KNIGHTS RUN AVENUE, SUITE 700 TAMPA, FL 33602	
Title: Name: Address: City-St-Zip:	D () E LUNSKIS, MARIL 8 BAHAMA CIRCI TAMPA, FL 3360	LE	Title: Name: Address: City-St-Zip:	SD (X) Change ( ) Addition KRZESINSKI, THOMAS S 302 KNIGHTS RUN AVENUE, SUITE 700 TAMPA, FL 33602	
Title: Name: Address: City-St-Zip:	D () E MITCHELL, JANK 119 HICKORY CF BRANDON, FL 3	REEK BLVD.	Title: Name: Address: City-St-Zip:	CFO (X) Change ( ) Addition MEDER, JAN J 302 KNIGHTS RUN AVENUE, SUITE 700 TAMPA, FL 33602	

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: THOMAS S. KRZESINSKI SD 03/14/2005