## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000005400

Entity Name: MULLALLY INSURANCE SERVICES, INC.

FILED Jan 03, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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16017 NORTH FLORIDA AVE SUITE 132 LUTZ, FL 33549

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 7527 WESLEY CHAPEL, FL 33544

FEI Number: 05-0548792 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MULLALLY, MARY JEAN
25703 SANTOS WAY
WESLEY CHAPEL, FL 33544 US

MULLALLY, MARY JEAN
16016 NORTH FLORIDA AVE
SUITE132
WESLEY CHAPEL, FL 33544 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: 01/03/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS. () Delete Title: CEO (X) Change () Addition
Name: MULLALLY, MARY J Name: MULLALLY, MARY J CEO/PRE
Address: 16017 NORTH FLORIDA AVE STE 132

Address: 16017 NORTH FLORIDA AVE STE 132

City-St-Zip: LUTZ, FL 33549 City-St-Zip: LUTZ, FL 33549

Title: MS ( ) Delete Title: SEC (X) Change ( ) Addition

Name: LUCIANO, FRAN A SEC

Address: 16017 NORTH FLORIDA AVE SUITE 132 Address: 16017 NORTH FLORIDA AVE SUITE 132

City-St-Zip: LUTZ, FL 33549 City-St-Zip: LUTZ, FL 33549

Title: ( ) Delete Title: VP ( ) Change (X) Addition

Name: LUCIANO, DOROTHY H VP

Address: Address: 16017 NORTH FLORIDA AVE SUITE 132

City-St-Zip: City-St-Zip: LUTZ, FL 33549

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: MARYJEAN MULLALLY CEO 01/03/2005