2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000013387

Entity Name: HIGH MARK INSURANCE SERVICES, INC.

FILED Mar 11, 2005 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

500 S FLORIDA AVE 4TH FLOOR 4740 CLEVELAND HEIGHTS BLVD. LAKELAND, FL 33801

SUITE 5

LAKELAND, FL 33813

Current Mailing Address: New Mailing Address:

500 S FLORIDA AVE 4TH FLOOR 4740 CLEVELAND HEIGHTS BLVD. LAKELAND, FL 33801

SUITE 5

LAKELAND, FL 33813 US

FEI Number: 65-1171882 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:

SANCHEZ, HENRY, JR PUTNAM, ABEL A 500 S FLÓRIDA AVE 500 S FLORIDA AVÉ 4TH FLOOR LAKELAND, FL 33801 SUITE 300

LAKELAND, FL 33801 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: ABEL A PUTNAM 03/11/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

Title:

Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: WELLS, MARK R Name: WELLS, MARK R

500 S FLORIDA AVE 4TH FLOOR 4740 CLEVELAND HEIGHTS BLVD., STE 5 Address: Address:

City-St-Zip: LAKELAND, FL 33801 City-St-Zip: LAKELAND, FL 33813 US

VTSD Title: VD (X) Change () Addition Title: () Delete Name:

PENNACHIO, JOHN Name: PENNACHIO, JOHN J

500 S FLORIDA AVE 4TH FLOOR 4740 CLEVEELAND HEIGHTS BLVD., STE 5 Address: Address:

LAKELAND, FL 33801 LAKELAND, FL 33813 US City-St-Zip: City-St-Zip:

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

Name: WISEMAN, KENNETH R Name:

4740 CLEVELAND HEIGHTS BLVD., STE 5 Address Address:

City-St-Zip: City-St-Zip: LAKELAND, FL 33813 US

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: KENNETH R WISEMAN 03/11/2005 Τ