

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000065882

FILED  
Feb 26, 2004  
Secretary of State

Entity Name: C.A.R. II INSURANCE, INC.

## Current Principal Place of Business:

99 OLD KINGS ROAD SOUTH  
SUITE 3  
FLAGLER BEACH, FL 32136

## New Principal Place of Business:

99 OLD KINGS ROAD, SOUTH  
SUITE 3  
FLAGLER BEACH, FL 32136

## Current Mailing Address:

99 OLD KINGS ROAD SOUTH  
SUITE 3  
FLAGLER BEACH, FL 32136

## New Mailing Address:

99 OLD KINGS ROAD, SOUTH  
SUITE 3  
FLAGLER BEACH, FL 32136

FEI Number: 57-1174067

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

CONSER, ANNA G  
99 OLD KINGS ROAD, SOUTH  
SUITE 3  
FLAGLER BEACH, FL 32136 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: ANNA G CONSER

02/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: CONSER, ANNA G  
Address: 99 OLD KINGS ROAD SOUTH #3  
City-St-Zip: FLAGLER BEACH, FL 32136

Title: VSD ( ) Delete  
Name: CONSER, ROBERT W  
Address: 99 OLD KINGS ROAD SOUTH #3  
City-St-Zip: FLAGLER BEACH, FL 32136

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: CONSER, ANNA G  
Address: 99 OLD KINGS ROAD, SOUTH, SUITE 3  
City-St-Zip: FLAGLER BEACH, FL 32136

Title: VSD (X) Change ( ) Addition  
Name: CONSER, ROBERT W  
Address: 99 OLD KINGS ROAD, SOUTH, SUITE 3  
City-St-Zip: FLAGLER BEACH, FL 32136

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: ANNA G CONSER

PTD

02/26/2004

Electronic Signature of Signing Officer or Director

Date