

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000075123

FILED
Apr 29, 2004
Secretary of State

Entity Name: OLD BRIDGE INSURANCE, INC.

Current Principal Place of Business:

814 A1A NORTH
SUITE 200
PONTE VEDRA BEACH, FL 32082 US

New Principal Place of Business:

Current Mailing Address:

814 A1A NORTH
SUITE 200
PONTE VEDRA BEACH, FL 32082 US

New Mailing Address:

FEI Number: 20-0105723

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOLPE, TIMOTHY W ESQ.
1301 RIVERPLACE BLVD.
SUITE 1700
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VOLPE, TIMOTHY W ESQ.
Address: 1301 RIVERPLACE BLVD., SUITE 1700
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: NORMAN, MICHAEL H
Address: 814 A1A NORTH, SUITE 200
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: DTS () Change (X) Addition
Name: ERVIN, RICHARD L JR.
Address: 814 A1A NORTH, SUITE 200
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Change (X) Addition
Name: ROGAN, JOHN E
Address: 814 A1A NORTH, SUITE 200
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: RICHARD L. ERVIN, JR.

DTS

04/29/2004

Electronic Signature of Signing Officer or Director

Date