## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000075123

FILED Apr 20, 2005 Secretary of State

Entity Name: OLD BRIDGE INSURANCE, INC.							
Current Principal Place of Business:				New Principa	New Principal Place of Business:		
814 A1A N SUITE 200 PONTE VE		I, FL 32082	US				
Current Mailing Address:				New Mailing	New Mailing Address:		
814 A1A N SUITE 200 PONTE VE		l, FL 32082	US				
FEI Number	: 20-0105723	FEI Number	Applied For ( )	FEI Number Not Applica	ble ( ) Certificate of Status	Desired ( )	
Name and Address of Current Registered Agent:				Name and A	Name and Address of New Registered Agent:		
VOLPE, TIMOTHY W ESQ. 1301 RIVERPLACE BLVD. SUITE 1700 JACKSONVILLE, FL 32207 US				4221 W. BOY	CFRA, LLC CORPORATE CENTER 3 AT INTL PLAZA 4221 W. BOY SCOUT BOULEVARD TAMPA, FL 33607 US		
	e named entity e of Florida.	submits this	statement for the p	ourpose of changing its r	registered office or registered a	gent, or both,	
SIGNATURE: JOYCE BENTUBO					04/20/2005		
	Electro	nic Signature	of Registered Ag	ent	Date		
Election Car	mpaign Financii	ng Trust Fund C	ontribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	NORMAN, MIC 814 A1A NOR	) Delete CHAEL H TH, SUITE 200 A BEACH, FL 32	2082 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	ERVIN, RICHA 814 A1A NOR	) Delete RD L JR. TH, SUITE 200 A BEACH, FL 32	2082	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	ROGAN, JOH 814 A1A NOR	) Delete N E TH, SUITE 200 A BEACH, FL 32	2082	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		

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 LEE ERVIN, JR. **VCFO** 04/20/2005