

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109392

FILED
Mar 30, 2005
Secretary of State

Entity Name: MODERN INSURANCE SERVICES, INC

Current Principal Place of Business:

2205 CROOKED OAK CT.
PANAMA CITY, FL 32408 US

New Principal Place of Business:

Current Mailing Address:

2205 CROOKED OAK CT.
PANAMA CITY, FL 32408 US

New Mailing Address:

P.O. BOX 18407
PANAMA CITY BEACH, FL 32417 US

FEI Number: 06-1710960

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNUGGS, SUSAN G
2205 CROOKED OAK CT
PANAMA CITY, FL 32408 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: PRES () Delete
Name: SNUGGS, JAY LEWIS JR.
Address: 2205 CROOKED OAK CT.
City-St-Zip: PANAMA CITY, FL 32408 US

Title: SECR () Delete
Name: SNUGGS, SUSAN G
Address: 2205 CROOKED OAK CT.
City-St-Zip: PANAMA CITY, FL 32408 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAY LEWIS SNUGGS, JR

PRES

03/30/2005

Electronic Signature of Signing Officer or Director

Date