2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# P03000115058

Entity Name: AMERICAN INSTITUTE OF INSURANCE CONTINUING EDUCATION, INC.

Current Principal Place of Business:

972 N RONALD REAGAN BLVD
LONGWOOD, FL 32750

New Principal Place of Business:

121 E. FIRST STREET
SANFORD, FL 32771

Current Mailing Address:

972 N RONALD REAGAN BLVD
LONGWOOD, FL 32750

New Mailing Address:

P. O. BOX 1147
SANFORD, FL 327721147

FEI Number: 20-0275218 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TONEY, KENNETH R
972 N RONALD REAGAN BLVD.
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

TONEY, KENNETH R
121 E. FIRST STREET
SANFORD, FL 32771 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: 04/29/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPTS ( ) Delete
Name: TONEY, KENNETH R
Address: % 972 N RONALD REAGAN BLVD
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTS (X) Change ( ) Addition
Name: TONEY, KENNETH R
Address: 121 E. FIRST STREET
City-St-Zip: SANFORD, FL 32771

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. TONEY DPTS 04/29/2005
Electronic Signature of Signing Officer or Director — Date