

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000115415

FILED
Mar 25, 2005
Secretary of State

Entity Name: MEDD INSURANCE ENTERPRISES, INC.

Current Principal Place of Business:

902 NORTH PINE HILLS RD.
ORLANDO, FL 32808

New Principal Place of Business:

563 FERGUSON DR. SUITE K
ORLANDO, FL 32805

Current Mailing Address:

902 NORTH PINE HILLS RD.
ORLANDO, FL 32808

New Mailing Address:

563 FERGUSON DR. SUITE K
ORLANDO, FL 32805

FEI Number: 56-2405063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORTNER, DOUGLAS W
902 NORTH PINE HILLS
ORLANDO, FL 32808 US

Name and Address of New Registered Agent:

FORTNER, DOUGLAS W
563 FERGUSON DR. SUITE K
ORLANDO, FL 32805 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:

03/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FORTNER, DOUGLAS W
Address: 580 BRANTLEY TERRACE WAY #103
City-St-Zip: ORLANDO, FL 32714

Title: SEC () Delete
Name: FORTNER, DOUGLAS W
Address: 580 BRANTLEY TERRACE WAY #103
City-St-Zip: ORLANDO, FL 32714

Title: DIR () Delete
Name: FORTNER, DOUGLAS W
Address: 580 BRANTLEY TERRACE WAY #103
City-St-Zip: ORLANDO, FL 32714

Title: OFFI () Delete
Name: FORTNER, EDNA E OFFICER
Address: 580 BRANTLEY TERRACE WAY #103
City-St-Zip: ORLANDO, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FORTNER, DOUGLAS W
Address: 5005 CUB LAKE DR.
City-St-Zip: APOPKA, FL 32703

Title: SEC (X) Change () Addition
Name: FORTNER, DOUGLAS W
Address: 5005 CUB LAKE DR.
City-St-Zip: APOPKA, FL 32703

Title: DIR (X) Change () Addition
Name: FORTNER, DOUGLAS W
Address: 5005 CUB LAKE DR.
City-St-Zip: APOPKA, FL 32703

Title: OFFI (X) Change () Addition
Name: FORTNER, EDNA E OFFICER
Address: 5005 CUB LAKE DR.
City-St-Zip: APOPKA, FL 32703

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: DOUGLAS FORTNER

PRES

03/25/2005

Electronic Signature of Signing Officer or Director

Date