2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# P04000022843

Entity Name: MITCHELL INSURANCE AND FINANCIAL SERVICES, INC.

Current Principal Place of Business:

8388 CHASON RD WEST
JACKSONVILLE, FL 32244

New Principal Place of Business:

Current Mailing Address:

8388 CHASON RD WEST
JACKSONVILLE, FL 32244

New Mailing Address:

FEI Number: 13-4273532 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DRUMMOND, DONALD L
103 EDWARDS RD
STARKE, FL 32091 US

Name and Address of New Registered Agent:

DRUMMOND, DONALD L
263 N TEMPLE AVENUE
STARKE, FL 32091 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: DONALD L. DRUMMOND, EA 04/27/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MITCHELL, CHARLES R
Address: 8388 CHASON RD WEST
City-St-Zip: JACKSONVILLE, FL 32244

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 Chapter 119, 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: CHARLES R. MITCHELL PD 04/27/2006
Electronic Signature of Signing Officer or Director Date