

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000046593

Entity Name: SOS INSURANCE SERVICES, INC.

FILED  
Apr 04, 2006  
Secretary of State

## Current Principal Place of Business:

13811 OLD DIXIE HWY  
HUDSON, FL 34667

## New Principal Place of Business:

13805 OLD DIXIE HWY  
HUDSON, FL 34667

## Current Mailing Address:

13811 OLD DIXIE HWY  
HUDSON, FL 34667

## New Mailing Address:

13805 OLD DIXIE HWY  
HUDSON, FL 34667

FEI Number: 20-0865316

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOUDEK, SHARRON  
13811 OLD DIXIE HWY  
HUDSON, FL 34667 US

## Name and Address of New Registered Agent:

HOUDEK, SHARRON  
13805 OLD DIXIE HWY  
HUDSON, FL 34667 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:

04/04/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HOUDEK, SHARRON  
Address: 21940 DUPREE DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

Title: VS ( ) Delete  
Name: CROCUS, SUZANNE  
Address: 5530 TERRAIN DE GOLF DRIVE  
City-St-Zip: LUTZ, FL 33558

## 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 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: SHARRON HOUDEK

P

04/04/2006

Electronic Signature of Signing Officer or Director

Date