# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 01, 2005**
**Secretary of State**

DOCUMENT# P04000048991

**Entity Name:** PROVISIONS INSURANCE INC.

**Current Principal Place of Business:**

5498 AEOLUS WAY
ORLANDO, FL 32808

**New Principal Place of Business:**

6239 EDGEWATER DRIVE
SUITE E5
ORLANDO, FL 32810

**Current Mailing Address:**

5498 AEOLUS WAY
ORLANDO, FL 32808

**New Mailing Address:**

**FEI Number: 20-0253560** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: PTD ( ) Delete
Name: CAPECE, JAMES J III
Address: 5498 AEOLUS WAY
City-St-Zip: ORLANDO, FL 32808

Title: VSD ( ) Delete
Name: THOMPSON, LISA K
Address: 5498 AEOLUS WAY
City-St-Zip: ORLANDO, FL 32808

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VSD (X) Change ( ) Addition
Name: THOMPSON, LISA K
Address: 324 LOCH LOMOND AVE
City-St-Zip: LONGWOOD, FL 32750

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: JAMES J CAPECE III PTD 04/01/2005

Electronic Signature of Signing Officer or Director — Date