2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000064314

Entity Name: TOWER HILL SELECT INSURANCE COMPANY

FILED Jan 19, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

7201 N.W. 11TH PLACE GAINESVILLE, FL 32605

Current Mailing Address: New Mailing Address:

7201 N.W. 11TH PLACE GAINESVILLE, FL 32605

FEI Number: 20-1078811 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

 CHIEF FINAJCIAL OFFICER
 CHIEF FINANCIAL OFFICER

 P.O. BOX 6200 (32314-6200)
 P.O. BOX 6200 (32314-6200)

 200 E. GAINES ST.
 200 E. GAINES ST.

 TALLAHASSEE, FL 32399 US
 TALLAHASSEE, FL 32399 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: CFO 01/19/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: CCEO (X) Change () Addition
Name: SHIVELY, WILLIAM J
Address: 608 SW 97TH TERRACE Address: 608 SW 97TH TERRACE

 608 SW 97TH TERRACE
 Address:
 608 SW 97TH TERRACE

 GAINESVILLE, FL 32607
 City-St-Zip:
 GAINESVILLE, FL 32607

Title: D () Delete Title: P (X) Change () Addition
Name: THOMASSON PHILLIP M
Name: THOMASSON PHILLIP M

 Name:
 THOMASSON, PHILLIP M
 Name:
 THOMASSON, PHILLIP M

 Address:
 3857 SW 93RD TERRACE
 Address:
 3857 SW 93RD TERRACE

 City-St-Zip:
 GAINESVILLE, FL 32608
 City-St-Zip:
 GAINESVILLE, FL 32608

Title: D () Delete Title: COOS (X) Change () Addition Name: MATZ, DONALD C JR Name: MATZ, DONALD C JR

 Name
 <th

Title: D () Delete Title: T (X) Change () Addition

 Name:
 PALMQUIST, JONATHON B
 Name:
 SHEEKEY, BRIAN T

 Address:
 3419 SW 92RD WAY
 Address:
 8817 SW 61ST AVENUE

 City-St-Zip:
 GAINESVILLE, FL 32608
 City-St-Zip:
 GAINESVILLE, FL 32608

Title: D (X) Delete Title: () Change () Addition

| Name: SHEKEY, BRIAN T | Name: Address: 8817 SW 61ST AVENUE | Address: City-St-Zip: GAINESVILLE, FL 32608 | 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: DONALD C. MATZ, JR. COOS 01/19/2006