

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Aug 18, 2005
Secretary of State**

DOCUMENT# P04000077308

Entity Name: SOUTH SHORE INSURANCE & INVESTMENTS INC

Current Principal Place of Business:

7041 US HWY. 301 S.
RIVERVIEW, FL 33569 US

New Principal Place of Business:

410 S WARE BLVD
SUITE 105
TAMPA, FL 33619 US

Current Mailing Address:

7041 US HWY. 301 S.
RIVERVIEW, FL 33569 US

New Mailing Address:

410 S WARE BLVD
SUITE 105
TAMPA, FL 33619 US

FEI Number: 20-1115787 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERVIEW TAX & MORTGAGE INC
7039 US HWY 301 S
RIVERVIEW, FL 33569 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

OFFICERS AND DIRECTORS:

Title: VP (X) Delete
Name: GROTHEER, MARK D
Address: 7041 US HWY. 301 S.
City-St-Zip: RIVERVIEW, FL 33569 US

Title: P () Delete
Name: DEMASK, CRAIG E
Address: 7041 US HWY. 301 S.
City-St-Zip: RIVERVIEW, FL 33569 US

Title: T (X) Delete
Name: GROTH, DEBORAH L
Address: 7041 US HWY. 301 S.
City-St-Zip: RIVERVIEW, FL 33569 US

Title: D (X) Delete
Name: KAZOR, CHRISTOPHER
Address: 12824 TALLOWOOD DRIVE
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: DEMASK, CRAIG E
Address: 410 S WARE BLVD. SUITE 105
City-St-Zip: TAMPA, FL 33619 US

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 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: CRAIG DEMASK

P

08/18/2005

Electronic Signature of Signing Officer or Director

Date