## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000095588

Entity Name: AJG OF NORTHWEST FLORIDA, INC.

FILED Apr 26, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1312 EAST AVERY STREET PENSACOLA, FL 32503 **Current Mailing Address: New Mailing Address:** 1312 EAST AVERY STREET PENSACOLA, FL 32503 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BELL, KEITH L JR. 1312 EAST AVERY STREET PENSACOLA, FL 32503 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition Name: BELL, JEANNE Name: 1717 NORTH 11TH AVENUE Address: Address: City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: () Delete Title: Title: () Change () Addition GOMILA, CLEON Name: Name: 825 BAYSHORE DRIVE Address: Address: City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: Title: Title: ( ) Delete () Change () Addition BELL, KEITH L JR. Name: Name: 1312 EAST AVERY STREET Address: Address: City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: Title: () Delete Title: () Change () Addition BELL, KEVIN Name: Name: Address: 1007 FAIRNIE AVENUE Address: City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: Title: Title: () Delete () Change () Addition BELL, CHRISTOPHER Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: KEITH L. BELL, JR. D 04/26/2005

4104 LOCUST STREET

KANSAS CITY, MO 64110

Address: City-St-Zip: