

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000118179

Entity Name: PROTECTIVE FINANCIAL GROUP, INC.

FILED
Apr 11, 2005
Secretary of State

Current Principal Place of Business:

ONE SAN JOSE PLACE
SUITE 25
JACKSONVILLE, FL 32257

New Principal Place of Business:

10355 ARROWHEAD DRIVE
JACKSONVILLE, FL 32257

Current Mailing Address:

ONE SAN JOSE PLACE
SUITE 25
JACKSONVILLE, FL 32257

New Mailing Address:

10355 ARROWHEAD DRIVE
JACKSONVILLE, FL 32257

FEI Number: 34-2011702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AUSTELL, C. MICHAEL
ONE SAN JOSE PLCE
SUITE 25
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

AUSTELL, C. MICHAEL
10355 ARROWHEAD DRIVE
JACKSONVILLE, FL 32257 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:

04/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AUSTELL, C. MICHAEL
Address: ONE SAN JOSE PLACE SUITE 25
City-St-Zip: JACKSONVILLE, FL 32257

Title: VD (X) Delete
Name: COLE, VERNON M
Address: ONE SAN JOSE PLACE SUITE 25
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: AUSTELL, C. MICHAEL
Address: 10355 ARROWHEAD DRIVE
City-St-Zip: JACKSONVILLE, FL 32257

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: C. MICHAEL AUSTELL

PD

04/11/2005

Electronic Signature of Signing Officer or Director

Date