

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000147125

FILED  
May 30, 2006  
Secretary of State

Entity Name: INSURANCE PARTNERS OF AMERICA, INC.

## Current Principal Place of Business:

ONE SE 3RD AVE., SUITE 2400  
MIAMI, FL 33131

## New Principal Place of Business:

## Current Mailing Address:

ONE SE 3RD AVE., SUITE 2400  
MIAMI, FL 33131

## New Mailing Address:

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HASNER, MARK M  
ONE SE 3RD AVE., SUITE 2400  
MIAMI, FL 33131 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HASNER, MICHAEL  
Address: 3564 PIEDMONT RD. NE  
City-St-Zip: ATLANTA, GA 30305

Title: D ( ) Delete  
Name: HASNER, ADAM M  
Address: 331 E. ATLANTIC AVE., #206  
City-St-Zip: DELRAY BCH, FL 33483

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HASNER, MICHAEL  
Address: 226 RIVER PARK DRIVE  
City-St-Zip: JUPITER, FL 33477

Title: D (X) Change ( ) Addition  
Name: HASNER, ADAM  
Address: 331 E. ATLANTIC AVE., #206  
City-St-Zip: DELRAY BCH, FL 33483

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: MICHAEL HASNER

D

05/30/2006

Electronic Signature of Signing Officer or Director

Date