

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000172503

Entity Name: INSURSOUTH MARKETING, INC.

FILED  
Mar 23, 2006  
Secretary of State

## Current Principal Place of Business:

3653 CAGNEY DRIVE SUITE 203  
TALLAHASSEE, FL 32309

## New Principal Place of Business:

3050 ST. ANDREWS WAY  
TALLAHASSEE, FL 32312

## Current Mailing Address:

3653 CAGNEY DRIVE SUITE 203  
TALLAHASSEE, FL 32309

## New Mailing Address:

515 NORTH BROAD STREET  
THOMASVILLE, GA 31792

FEI Number: 20-2199876

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WARREN, R BRUCE  
262 HIAMONEE DR  
TALLAHASSEE, FL 32312 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LEWIS, ZACHARY S  
Address: 3653 CAGNEY DRIVE SUITE 203  
City-St-Zip: TALLAHASSEE, FL 32309

Title: ST ( ) Delete  
Name: LEWIS, NICHOLAS J  
Address: 3653 CAGNEY DRIVE SUITE 203  
City-St-Zip: TALLAHASSEE, FL 32309

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LEWIS, ZACHARY S  
Address: 515 NORTH BROAD ST  
City-St-Zip: THOMASVILLE, GA 31792

Title: ST (X) Change ( ) Addition  
Name: LEWIS, NICHOLAS J  
Address: 515 NORTH BROAD STREET  
City-St-Zip: THOMASVILLE, GA 31792

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: ZACHARY S. LEWIS

PRES

03/23/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date