2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# P05000009196

Entity Name: ACCORD INSURANCE NETWORK OF AMERICA, INC.

Current Principal Place of Business:

2910 KERRY FOREST PARKWAY, SUITE D4-365
TALLAHASSEE, FL 32309

New Principal Place of Business:

3101 N. FEDERAL HIGHWAY SUITE 300
OAKLAND PARK, FL 33306

Current Mailing Address:

2910 KERRY FOREST PARKWAY, SUITE D4-365
TALLAHASSEE, FL 32309

New Mailing Address:

3101 N. FEDERAL HIGHWAY SUITE 300
OAKLAND PARK, FL 33306

FEI Number: 20-2188075 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OUTLAW, DAVID
2910 KERRY FOREST PARKWAY
SUITE D4-365
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

OUTLAW, DAVID
3101 N FEDERAL HIGHWAY SUITE 300
OAKLAND PARK, FL 33306 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: _____ 04/29/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: OUTLAW, DAVID
Address: 2910 KERRY FOREST PARKWAY, SUITE D4-365
City-St-Zip: TALLAHASSEE, FL 32309

Title: ASAT ( ) Delete
Name: KANE, THOMAS J III
Address: 2217 NE 19TH AVE
City-St-Zip: FT LAUDERDALE, FL 33305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition
Name: OUTLAW, DAVID
Address: 3101 N. FEDERAL HIGHWAY SUITE 300
City-St-Zip: OAKLAND PARK, FL 33306

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

I hereby certify that the information supplied with this filing does not qualify 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: DAVID OUTLAW PST 04/29/2008
Electronic Signature of Signing Officer or Director — Date