

## **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000009196

**FILED**  
**May 06, 2008**  
**Secretary of State**

**Entity Name:** ACCORD INSURANCE NETWORK OF AMERICA, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**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  
3101 N FEDERAL HIGHWAY SUITE 300  
OAKLAND PARK, FL 33306 US

**Name and Address of New Registered Agent:**

BURN, DAVID N  
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: DAVID N. BURN

05/06/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

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

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: P (X) Change ( ) Addition  
Name: KANE, THOMAS J III  
Address: 3101 N. FEDERAL HIGHWAY SUITE 300  
City-St-Zip: OAKLAND PARK, FL 33306

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

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 N. BURN

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05/06/2008

Electronic Signature of Signing Officer or Director

Date