

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000056148

FILED
Jan 04, 2007
Secretary of State

Entity Name: FLORIDA WORKERS COMPENSATION, INC.

Current Principal Place of Business:

3442 CHAPEL CREEK CIR
ZEPHYRHILLS, FL 335437704

New Principal Place of Business:

3442 CHAPEL CREEK CIR
WESLEY CHAPEL, FL 33543

Current Mailing Address:

3442 CHAPEL CREEK CIRCLE
WESLEY CHAPEL, FL 33543

New Mailing Address:

FEI Number: 20-2730542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIEVES, ROBERT G
3442 CHAPEL CREEK CIR
ZEPHYRHILLS, FL 335437704 US

Name and Address of New Registered Agent:

GRIEVES, ROBERT G
3442 CHAPEL CREEK CIR
WESLEY CHAPEL, FL 33543 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:

01/04/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SCHALLMO, DAVID
Address: 417 N SAFFORD AVE
City-St-Zip: TARPON SPRINGS, FL 346893465

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SCHALLMO, DAVID
Address: 5510 RIVER RD. SUITE 214
City-St-Zip: NEW PORT RICHEY, FL 34652

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: DAVID SCHALLMO

PRES

01/04/2007

Electronic Signature of Signing Officer or Director

Date