2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2006
Secretary of State

DOCUMENT# P05000061052

Entity Name: BLANDFORD INSURANCE SERVICES, CORP.

Current Principal Place of Business:

2000 U.S. 1
STE. 100 N.
COCONUT GROVE, FL 33133

New Principal Place of Business:

2000 U.S. 1
STE. 100 D.
COCONUT GROVE, FL 33133

Current Mailing Address:

2000 U.S. 1
STE. 100 N.
COCONUT GROVE, FL 33133

New Mailing Address:

2000 U.S. 1
STE. 100 D.
COCONUT GROVE, FL 33133

FEI Number: 35-2253663 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLANDFORD, OWEN FRANZ
3875 S.W. 8TH STREET
MIAMI, FL 33134 US

Name and Address of New Registered Agent:

BLANDFORD, OWEN FRANZ
2000 U.S. 1
STE. 100 D.
COCONUT GROVE, FL 33133 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: 01/11/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BLANDFORD, OWEN FRANZ
Address: 3875 S.W. 8TH STREET
City-St-Zip: MIAMI, FL 33134

Title: SD ( ) Delete
Name: BLANDFORD, FRANCIA ELENA
Address: 3875 S.W. 8TH STREET
City-St-Zip: MIAMI, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BLANDFORD, OWEN FRANZ
Address: 2000 U.S. 1 STE 100 D
City-St-Zip: COCONUT GROVE, FL 33133

Title: SD (X) Change ( ) Addition
Name: BLANDFORD, FRANCIA ELENA
Address: 2000 U.S. 1 STE 100 D
City-St-Zip: COCONUT GROVE, FL 33133

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: OWEN FRANZ BLANDFORD PD 01/11/2006
Electronic Signature of Signing Officer or Director — Date