

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000124580

FILED
Mar 02, 2006
Secretary of State

Entity Name: MEDICAL INSURANCE CONSULTANTS, INC.

Current Principal Place of Business:

1442 PINYON PINE DRIVE
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 51329
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 20-3419967

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNHAM-LEACH, CARRIE
1442 PINYON PINE DRIVE
SARASOTA, FL 34240 US

Name and Address of New Registered Agent:

DUNHAM, JOHN R III
2 NORTH TAMIAMI TRAIL
SUITE 500
SARASOTA, FL 34236 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: JOHN R. DUNHAM, III

03/02/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DUNHAM-LEACH, CARRIE
Address: 1442 PINYON PINE DRIVE
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: CARRIE DUNHAM-LEACH

D

03/02/2006

Electronic Signature of Signing Officer or Director

Date