2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2006
Secretary of State

DOCUMENT# P05000146088

Entity Name: LIFEPORT INSURANCE GROUP, INC

Current Principal Place of Business:

12418 EARLY RUN LN
RIVERVIEW, FL 33569 US

New Principal Place of Business:

Current Mailing Address:

1108 W KENNEDY BLVD
TAMPA, FL 33609 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MONZON, JORGE E
12418 EARLY RUN LN
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MONZON, JORGE E
Address: 12418 EARLY RUN LN
City-St-Zip: RIVERVIEW, FL 33569 US

Title: VP (X) Delete
Name: ANDUJAR, LUIS A SR
Address: 16403 CYPRESS MULCH CIR # 1905
City-St-Zip: TAMPA, FL 33624 US

Title: DIR (X) Delete
Name: PEREZ, MIGDALIA
Address: 25317 GEDDY DR
City-St-Zip: LAND O LAKES, FL 34639 US

Title: SEC ( ) Delete
Name: MONZON, MIGDALIA
Address: 5415 36TH CT E. UNIT 202
City-St-Zip: ELLENTON, FL 34222 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JORGE MONZON P 02/08/2006
Electronic Signature of Signing Officer or Director Date