

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000157081

FILED
Feb 08, 2006
Secretary of State

Entity Name: WREN SUMMERS INSURANCE INC.

Current Principal Place of Business:

1036 N. MILLS AVENUE
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

1036 N. MILLS AVENUE
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 20-3879838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLASS, SUSAN B
100 LACOSTA LANE
SUITE 140
DAYTONA BEACH, FL 32114 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: SUMMERS, MARTIN M
Address: PO BOX 7025 COUNTY ROAD 46A SUITE1071 #512
City-St-Zip: LAKE MARY, FL 32746 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SUMMERS, MARTIN M
Address: 1036 N. MILLS AVE
City-St-Zip: ORLANDO, FL 32803 US

Title: VP () Change (X) Addition
Name: WREN, PHILLIP W
Address: 1036 N. MILLS AVE
City-St-Zip: ORLANDO, FL 32803

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: PHILLIP W. WREN

VP

02/08/2006

Electronic Signature of Signing Officer or Director

Date