

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000006459

FILED
Apr 27, 2007
Secretary of State

Entity Name: FREEDOM INSURANCE & FINANCIAL SERVICES, P.A.

Current Principal Place of Business:

3950 N ANDREWS AVENUE
OAKLAND PARK, FL 33309

New Principal Place of Business:

18345 BRIDLE CLUB DRIVE
TAMPA, FL 33647

Current Mailing Address:

3950 N ANDREWS AVENUE
OAKLAND PARK, FL 33309

New Mailing Address:

4561 NW 10TH AVENUE
FORT LAUDERDALE, FL 33309

FEI Number: 01-0860335

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THEOPHIN, FONTANE
4651 NW 10TH AVENUE
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

THEOPHIN, FONTANE
4651 NW 10TH AVENUE
FORT LAUDERDALE, FL 33309 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: FONTANE THEOPHIN

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: THEOPHIN, ROOVELINE
Address: 208 NW 16TH ST
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: VD () Delete
Name: THEOPHIN, FONTANE
Address: 4561 NW 10TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: CEOD () Delete
Name: BAPTISTE, ROBERT JEAN
Address: 2507 N ANDREWS AVENUE
City-St-Zip: WILTON MANORS, FL 33311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: CEOD (X) Change () Addition
Name: LEVASSEUR, KENOL
Address: 18345 BRIDLE CLUB DRIVE
City-St-Zip: TAMPA, FL 33647

I hereby certify that the information supplied with this filing does not qualify 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: FONTANE THEOPHIN

VD

04/27/2007

Electronic Signature of Signing Officer or Director

Date