2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2007
Secretary of State

DOCUMENT# P06000013826

Entity Name: KAREN MORROW INSURANCE SERVICES, INC.

Current Principal Place of Business:

455 SE KITCHING CIR
STUART, FL 34994

New Principal Place of Business:

1550 S.E. SHEFFIELD TERR
#201
STUART, FL 34994 US

Current Mailing Address:

455 SE KITCHING CIR
STUART, FL 34994

New Mailing Address:

1550 SE SHEFFIELD TERR.
#201
STUART, FL 34994 US

FEI Number: 41-2193363 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORROW, KAREN
455 SE KITCHING CIR
STUART, FL 34994 US

Name and Address of New Registered Agent:

MORROW, KAREN L MISS
1550 SE SHEFFIELD TERR.
#201
STUART, FL 34994 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: KAREN MORROW 01/09/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: MORROW, KAREN
Address: 455 SE KITCHING CIR
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: MORROW, KAREN L MISS
Address: 1550 SE SHEFFIELD TERR.. #201
City-St-Zip: STUART, FL 34994 US

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: KAREN MORROW PRES 01/09/2007
Electronic Signature of Signing Officer or Director Date