2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Feb 16, 2006
Secretary of State

DOCUMENT# P93000008194

Entity Name: INTERNATIONAL BROKERAGE AND SURPLUS LINES, INC.

Current Principal Place of Business:

122 EAST PINE ST
LAKELAND, FL 33801 US

New Principal Place of Business:

Current Mailing Address:

122 EAST PINE ST
LAKELAND, FL 33801 US

New Mailing Address:

FEI Number: 59-3165272 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HOLLIDAY, CLYDE J III
122 EAST PINE ST
LAKEAND, FL 33801 US

Name and Address of New Registered Agent:

HOLLIDAY, CLYDE J III
122 EAST PINE ST
LAKELAND, FL 33801 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: CLYDE J. HOLLIDAY III 02/16/2006
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: HOLLIDAY, CLYDE J IV
Address: 2339 MEATH DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: S ( ) Delete
Name: HOLLIDAY, CLYDE J III
Address: 653 HUNTERS RUN BLVD
City-St-Zip: LAKELAND, FL 33809

Title: T ( ) Delete
Name: HOLLIDAY, ELIZABETH C
Address: 653 HUNTERS RUN BLVD
City-St-Zip: LAKELAND, FL 33809

Title: D ( ) Delete
Name: HOLLIDAY, JASON S
Address: 926 HIDDEN DR
City-St-Zip: LAKELAND, FL 33809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HOLLIDAY, CLYDE J IV
Address: 12355 CREEK EDGE DRIVE
City-St-Zip: RIVERVIEW, FL 33569

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

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

Title: D (X) Change ( ) Addition
Name: HOLLIDAY, JASON S
Address: 5558 GREY HAWK LANE
City-St-Zip: LAKELAND, FL 33810

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: CLYDE J. HOLLIDAY III S 02/16/2006
Electronic Signature of Signing Officer or Director Date