

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000008194

FILED
Jul 10, 2007
Secretary of State

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:

5137 SOUTH LAKELAND DR., STE #2
LAKELAND, FL 33813 US

Current Mailing Address:

122 EAST PINE ST
LAKELAND, FL 33801 US

New Mailing Address:

5137 SOUTH LAKELAND DR. STE #2
LAKELAND, FL 33813 US

FEI Number: 59-3165272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

HOLLIDAY, CLYDE J III
5137 SOUTH LAKELAND DR., STE #2
LAKELAND, FL 33813 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

07/10/2007

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: 12355 CREEK EDGE DRIVE
City-St-Zip: RIVERVIEW, FL 33569

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: 5558 GREY HAWK LANE
City-St-Zip: LAKELAND, FL 33810

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 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 IV

P

07/10/2007

Electronic Signature of Signing Officer or Director

Date