

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000066118

FILED
Jul 19, 2004
Secretary of State

Entity Name: HEADLEY INSURANCE CORPORATION

Current Principal Place of Business:

3544 S FL AVE
SUITE 5
LAKELAND, FL 33803 US

New Principal Place of Business:

3544 S FL AVE
LAKELAND, FL 33803 US

Current Mailing Address:

3544 S FL AVE
SUITE 5
LAKELAND, FL 33803 US

New Mailing Address:

3544 S FL AVE
LAKELAND, FL 33803 US

FEI Number: 59-3200596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HEADLEY, GARY B
3544 S FL AVE
SUITE 5
LAKELAND, FL 33803 US

Name and Address of New Registered Agent:

HEADLEY, GARY B
3544 S FL AVE
LAKELAND, FL 33803 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:

07/19/2004

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: D () Delete
Name: HEADLEY, GARY B
Address: 3544 S FL AVE
City-St-Zip: LAKELAND, FL 33803

Title: D () Delete
Name: HEADLEY, SCOTT
Address: 1544 S FL AVE
City-St-Zip: LAKELAND, FL 33003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: HEADLEY, SCOTT
Address: 3544 S FL AVE
City-St-Zip: LAKELAND, FL 33803

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GARY B. HEADLEY

D

07/19/2004

Electronic Signature of Signing Officer or Director

Date