2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000077569

Entity Name: CASUALTY INSURANCE SERVICES, INC.

FILED Feb 02, 2005 Secretary of State

Current D.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1206 N. MI SUITE B ORLANDC	LLS AVE), FL 32803	US	1100 MONTANA STR ORLANDO, FL 32803		
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1206 N. MI SUITE B ORLANDC	LLS AVE), FL 32803	US			
FEI Number:	: 59-3233277	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
18334 WE	RO, KAYTON ST SHORE L ND, FL 3473				
in the State	e of Florida.	submits this statement for the pur	rpose of changing its registere	d office or registered agent, or both,	
SIGNATUF		onic Signature of Registered Agent	•	 Date	
Election Can		ng Trust Fund Contribution ().	•	Suite	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
	VP (
Title: Name: Address: City-St-Zip:	SCARBORO, 11032 COUN CLERMONT,	TRY HILL RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Name: Address:	SCARBORO, 11032 COUN CLERMONT,	KAYTON D FRY HILL RD FL 34711) Delete KAYTON DRE LN	Name: Address:	() Change () Addition () Change () Addition	

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: KAYTON SCARBORO D 02/02/2005