

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000030979

FILED
Apr 18, 2005
Secretary of State

Entity Name: INVESTORS INSURANCE & FINANCIAL GROUP INC.

Current Principal Place of Business:

2165 TREVOR ROAD
PALM HARBOR, FL 34683 US

New Principal Place of Business:

2165 TREVOR ROAD
PALM HARBOR, FL 346831733 US

Current Mailing Address:

2165 TREVOR ROAD
PALM HARBOR, FL 34683 US

New Mailing Address:

2165 TREVOR ROAD
PALM HARBOR, FL 346831733 US

FEI Number: 59-3308207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHETZEL, TERRI B
2165 TREVOR ROAD
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

WHETZEL, TERRI B
2165 TREVOR ROAD
PALM HARBOR, FL 346831733 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:

04/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDS () Delete
Name: WHETZEL, TERRI B
Address: 2165 TREVOR ROAD
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: WHETZEL, TERRI B
Address: 2165 TREVOR ROAD
City-St-Zip: PALM HARBOR, FL 346831733 US

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: TERRI B. WHETZEL

PSD

04/18/2005

Electronic Signature of Signing Officer or Director

Date