

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000062734

FILED
Mar 25, 2004
Secretary of State

Entity Name: A AMERICAN AUTO INSURANCE OF WINTER PARK, INC.

Current Principal Place of Business:

3586 ALOMA AVE
STE #3
WINTER PARK, FL 32792 US

New Principal Place of Business:

Current Mailing Address:

3586 ALOMA AVE
STE #3
WINTER PARK, FL 32792 US

New Mailing Address:

FEI Number: 59-3331568 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

VEDI, PARDEEP K
1819 VALLEY WOOD WAY
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VEDI, NEEMA
Address: 1819 VALLEY WOOD WAY
City-St-Zip: LAKE MARY, FL 32746

Title: VP () Delete
Name: VEDI, PARDEEP K
Address: 1819 VALLEY WOOD WAY
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: PARDEEP K VEDI

VP

03/25/2004

Electronic Signature of Signing Officer or Director

Date