

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000067362

**FILED  
Jan 05, 2007  
Secretary of State****Entity Name:** PENINSULA INSURANCE GROUP, INC.**Current Principal Place of Business:**1040 BAYVIEW DR  
STE 410  
FORT LAUDERDALE, FL 33304**New Principal Place of Business:****Current Mailing Address:**1040 BAYVIEW DR  
STE 410  
FORT LAUDERDALE, FL 33304**New Mailing Address:****FEI Number:** 65-0694248      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CLEVELAND III, JAMES W  
750 N OCEAN BLVD  
#1204  
POMPANO BEACH, FL 33062 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:** PRES ( ) Delete  
**Name:** CLEVELAND III, JAMES W  
**Address:** 750 N OCEAN BLVD #1204  
**City-St-Zip:** POMPANO BEACH, FL 33062**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****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 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: JAMES W CLEVELAND III      PRES      01/05/2007

Electronic Signature of Signing Officer or Director

Date