2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000071273

Entity Name: ASSET BUILDERS & INSURANCE, INC.

FILED Jan 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

40 S.W. 12TH STREET 40 S.W. 12TH STREET SUITE 202B SUITE 102A

OCALA, FL 34474 OCALA, FL 34474

Current Mailing Address: New Mailing Address:

P.O. BOX 556

FAIRFIELD, FL 32634 US

FEI Number: 65-0690830 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHIELDS, JOHN P SHIELDS, JOHN P 40 SW 12TH STREET 40 SW 12TH STREET SUITE 202B SUITE 102A OCALA, FL 34474 US OCALA, FL 34474 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: JOHN P. SHIELDS 01/04/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

SHIELDS, JOHN P SHIELDS, JOHN P Name: Name: 40 SW 12TH STREET, SUITE 202B 40 SW 12TH STREET, SUITE 102A Address: Address:

City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34474

Title: Title: (X) Change () Addition () Delete

Name: SHIELDS, DAWN F Name: SHIELDS, DAWN F

40 SW 12TH STREET, SUITE 202B Address: 40 SW 12TH STREET, SUITE 102A Address:

OCALA, FL 34474 OCALA, FL 34474 City-St-Zip: 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: JOHN P. SHIELDS **PRES** 01/04/2007

Electronic Signature of Signing Officer or Director

Date