2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2007
Secretary of State

DOCUMENT# P96000089078

Entity Name: INSURANCE UNDERWRITERS & ASSOCIATES, INC.

Current Principal Place of Business:

6261 22ND AVE N
ST PETERSBURG, FL 337104105

New Principal Place of Business:

2100 5TH AVE NORTH
ST PETERSBURG, FL 33713

Current Mailing Address:

6261 22ND AVE N
ST PETERSBURG, FL 337104105

New Mailing Address:

2100 5TH AVE NORTH
ST PETERSBURG, FL 33713

FEI Number: 20-5752105 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HOLLOWELL, DAVID A
6261-22ND AVE NORTH
SAINT PETERSBURG, FL 337104105 US

Name and Address of New Registered Agent:

HOLLOWELL, DAVID A
2100 5TH AVE N
SAINT PETERSBURG, FL 33713 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: DAVID A. HOLLOWELL 02/06/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: HOLLOWELL, DAVID A
Address: 6261 22ND AVE. N.
City-St-Zip: ST PETERSBURG, FL 337104105

Title: VP ( ) Delete
Name: HOLLOWELL, KAREN C
Address: 6261 22ND AVE., N.
City-St-Zip: ST PETERSBURG, FL 33710 41

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HOLLOWELL, DAVID A
Address: 2100 5TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33713

Title: VP (X) Change ( ) Addition
Name: HOLLOWELL, KAREN C
Address: 2100 5TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33713 41

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: KAREN C. HOLLOWELL VP 02/06/2007
Electronic Signature of Signing Officer or Director Date