

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000047082

FILED
Mar 04, 2004
Secretary of State

Entity Name: CONTRACTORS INSURANCE ADMINISTRATORS, INC. OF FLORIDA

Current Principal Place of Business:

9003 WATERFORD CTR BLVD
#100
AUSTIN, TX 78758 US

New Principal Place of Business:

6300 BRIDGEPOINT PARKWAY
BUILDING 3, SUITE 500
AUSTIN, TX 78730 US

Current Mailing Address:

9003 WATERFORD CTR BLVD
#100
AUSTIN, TX 78758 US

New Mailing Address:

6300 BRIDGEPOINT PARKWAY
BUILDING 3, SUITE 500
AUSTIN, TX 78730 US

FEI Number: 74-2836206

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PS () Delete
Name: SAKOS, RENI
Address: 611 CRYSTAL CREEK DR
City-St-Zip: AUSTIN, TX 78758

Title: VP () Delete
Name: CLINE, GLENN
Address: 1420 DEER LEDGE TRAIL
City-St-Zip: CEDAR PARK, TX 78613

Title: S () Delete
Name: GOODALE, KRISTIN
Address: 10613 SCOTLAND WELL DR
City-St-Zip: AUSTIN, TX 78750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: CLINE, GLENN
Address: 1420 DEER LEDGE TRAIL
City-St-Zip: CEDAR PARK, TX 78613

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: RENI SAKOS

PRES

03/04/2004

Electronic Signature of Signing Officer or Director

Date