


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90076 006 ***150.00

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| DOCUMENT # P97000087621 |  |
| 1. Entity Name SUMMIT INSURANCE STORE, INC. | |

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| Principal Place of Business 6847 N 9TH AVE B PENSACOLA, FL 32504 | Mailing Address 6847 N 9TH AVE B PENSACOLA, FL 32504 |
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94044324



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| 2. Principal Place of Business 6706 N 9th Ave Suite Apt. #, etc. C-3 City & State Pensacola FL Zip 32504 Country Escambia | 3. Mailing Address 6706 N 9th Ave Suite Apt. #, etc. C-3 City & State Pensacola FL Zip 32504 Country Escambia |
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04022004 Chg-P CR2E034 (10/03)

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| 4. FEI Number 59-3472327 | Applied For <input type="checkbox"/> Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent BROWN, GREGORY A 6847 N 9TH AVENUE STE B PENSACOLA, FL 32504 | 7. Name and Address of New Registered Agent Name Gregory A Brown Street Address (R.O. Box Number is Not Acceptable) 6706 N 9th Ave Ste C-3 City Pensacola FL Zip Code 32504 |
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8. 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. I am familiar with, and accept the obligations of registered agent.

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| SIGNATURE  Signature, typed or printed name of registered agent and date if applicable. | Gregory A Brown (NOTE: Registered Agent signature required when reinstating) | 4/2/04 DATE |
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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|-----------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------------------|
| TITLE P | NAME BROWN, GREGORY A | TITLE President | NAME Gregory A Brown |
| STREET ADDRESS 6847 N 9TH AVE STE-B | CITY-ST-ZIP PENSACOLA, FL 32504 | STREET ADDRESS 6706 N. 9th Ave Ste C-3 | CITY-ST-ZIP Pensacola, FL 32504 |
| <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME | STREET ADDRESS CITY-ST-ZIP | TITLE NAME | STREET ADDRESS CITY-ST-ZIP |
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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| SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR | Gregory A Brown | 4/2/04 Date | 850-444-2264 Daytime Phone |
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