2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# P97000096343

Entity Name: CLAWSON & CLAWSON INSURANCE, INC.

Current Principal Place of Business:

1200 WESTON ROAD
3RD FLOOR
WESTON, FL 33326

New Principal Place of Business:

2731 EXECUTIVE PARK DRIVE
SUITE 8
WESTON, FL 33331

Current Mailing Address:

1200 WESTON ROAD
3RD FLOOR
WESTON, FL 33326

New Mailing Address:

2731 EXECUTIVE PARK DRIVE
SUITE 8
WESTON, FL 33331

FEI Number: 65-0794703 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEGAL INFORMATION SERVICES INC.
1290 WESTON ROAD
SUITE 300
WESTON, FL 33326 US

Name and Address of New Registered Agent:

LEGAL INFORMATION SERVICES INC.
2500 WESTON ROAD
SUITE 404
WESTON, FL 33331 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: 04/26/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CLAWSON, PATRICK D
Address: 1200 WESTON ROAD, 3RD FLOOR
City-St-Zip: WESTON, FL 33326

Title: D ( ) Delete
Name: CLAWSON, EARLE H
Address: 1200 WESTON ROAD, 3RD FLOOR
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: CLAWSON, PATRICK D
Address: 2731 EXECUTIVE PARK DRIVE, #8
City-St-Zip: WESTON, FL 33331

Title: D (X) Change ( ) Addition
Name: CLAWSON, EARLE H
Address: 2731 EXECUTIVE PARK DRIVE, #8
City-St-Zip: WESTON, FL 33331

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: PATRICK D CLAWSON D 04/26/2005
Electronic Signature of Signing Officer or Director — Date