

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000020238

FILED
Apr 18, 2005
Secretary of State

Entity Name: MANAGED INSURANCE SERVICES INC.

Current Principal Place of Business:

225 NE MIZNER BLVD
SUITE 680
BOCA RATON, FL 33432

New Principal Place of Business:

3200 NE 14TH STREET
POMPANO BEACH, FL 33062

Current Mailing Address:

225 NE MIZNER BLVD
SUITE 680
BOCA RATON, FL 33432

New Mailing Address:

3200 NE 14TH STREET
POMPANO BEACH, FL 33062

FEI Number: 65-0834480

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: P () Delete
Name: O'NEAL, DANIEL
Address: 2670 NE 23RD PLACE
City-St-Zip: POMPANO BEACH, FL 33062

Title: B () Delete
Name: BROWNING, PAMELA
Address: 2670 NE 23RD PLACE
City-St-Zip: POMPANO BEACH, FL 33062

Title: ST () Delete
Name: BROCARD-SANTIAGO, REBECCA
Address: 1400 SW 16TH STREET
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: O'NEAL, DANIEL R
Address: 2670 NE 23RD PLACE
City-St-Zip: POMPANO BEACH, FL 33062

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

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: DANIEL R. O'NEAL

P

04/18/2005

Electronic Signature of Signing Officer or Director

_____ Date