2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2006
Secretary of State

DOCUMENT# P98000072042

Entity Name: ARROWHEAD GENERAL INSURANCE AGENCY OF FLORIDA, INC.

Current Principal Place of Business:

701 B STREET
SUITE 2100
SAN DIEGO, CA 92101

New Principal Place of Business:

Current Mailing Address:

701 B STREET
SUITE 2100
SAN DIEGO, CA 92101

New Mailing Address:

FEI Number: 33-0819329 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HIQ CORPORATE SERVICES, INC.
1574 VILLAGE SQUARE BLVD
SUITE 100
TALLAHASSEE, FL 32309 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: COBD ( ) Delete
Name: KILKENNY, PATRICK J
Address: 701 B STREET, SUITE 2100
City-St-Zip: SAN DIEGO, CA 92101

Title: D ( ) Delete
Name: HARMON, MARIANNE
Address: 701 B STREET, SUITE 2100
City-St-Zip: SAN DIEGO, CA 92101

Title: TD ( ) Delete
Name: SCHRANER, ROBERT K
Address: 701 B STREET, SUITE 2100
City-St-Zip: SAN DIEGO, CA 92101

Title: PD ( ) Delete
Name: RUYAK, FRANCIS D
Address: 701 B STREET, SUITE 2100
City-St-Zip: SAN DIEGO, CA 92101

Title: SD ( ) Delete
Name: SCHRANER, ROBERT K
Address: 701 B STREET, SUITE 2100
City-St-Zip: SAN DIEGO, CA 92101

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: D ( ) Change (X) Addition
Name: WALKER, CHRIS
Address: 701 B STREET, SUITE 2100
City-St-Zip: SAN DIEGO, CA 92101

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: ROBERT K SCHRANER SD 01/18/2006

Electronic Signature of Signing Officer or Director — Date