2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000072896

Entity Name: INSURANCE GROUP OF SOUTH FLORIDA, INC.

FILED Mar 26, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1835 S PERIMETER RD 951 SW 4TH AVE

STE 165 BOCA RATON, FL 33432 FORT LAUDERDALE, FL 33309

Current Mailing Address: New Mailing Address:

C/O BLAKESBERG & CO CPAS 951 SW 4TH AVE BOCA RATON, FL 334325803

FEI Number: 65-0858910 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WILLIAM, BLAKESBERG
951 SW 4TH AVE
BOCA RATON, FL 334225803 US
WILLIAM, BLAKESBERG
951 SW 4TH AVE
BOCA RATON, FL 33432 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: 03/26/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 FEINMAN, STEVEN
 Name:
 FEINMAN, STEVEN

 Address:
 1835 S. PERIMETER STE 165
 Address:
 951 SW 4TH AVE

 City-St-Zip:
 FORT LAUDERDALE, FL 33309
 City-St-Zip:
 BOCA RATON, FL 33432

I hereby certify that the information supplied with this filing does not qualify 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: STEVEN FEINMAN PD 03/26/2009