2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# P98000100449

Entity Name: JUDY MCCAIN INSURANCE SERVICES, INC.

Current Principal Place of Business:

939 59TH AVENUE
SAINT PETERSBURG, FL 33706

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 66186
B
ST. PETERSBURG, FL 33786 US

New Mailing Address:

P.O. BOX 66186
B
ST. PETERSBURG, FL 33736 US

FEI Number: 59-3544716 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

R. JEFFREY STULL, P.A.
602 SOUTH BOULEVARD
TAMPA, FL 33606 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: D ( ) Delete
Name: MCCAIN, JUDY R
Address: 6830 CENTRAL AVE. #B
City-St-Zip: ST. PETERSBURG, FL 33707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MCCAIN, JUDY R
Address: 6534 CENTRAL AVE.
City-St-Zip: ST. PETERSBURG, FL 33707

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: JUDY MCCAIN PRES 04/29/2004

Electronic Signature of Signing Officer or Director Date