2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000030533

Entity Name: BLAKEMORE BROKERAGE INSURANCE SERVICES, INC.

FILED Apr 24, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

1747 VAN BUREN ST. 1222 LINCOLN STREET #870 HOLLYWOOD, FL 33019

HOLLYWOOD, FL 33020

Current Mailing Address: New Mailing Address:

1747 VAN BUREN ST. 1861 N. FEDERAL HWY #870 #160

HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020

FEI Number: 65-0916907 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:

BLAKEMORE, EDWIN N
1747 VAN BUREN ST.
#870

BLAKEMORE, EDWIN N
1222 LINCOLN STREET
HOLLYWOOD, FL 33019 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: EDWIN N. BLAKEMORE 04/24/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

HOLLYWOOD, FL 33020 US

D () Delete Title: PRES (X) Change () Addition

 Name:
 BLAKEMORE, EDWIN N
 Name:
 BLAKEMORE, EDWIN N

 Address:
 1747 VAN BUREN ST. #870
 Address:
 1222 LINCOLN STREET

 City-St-Zip:
 HOLLYWOOD, FL 33020
 City-St-Zip:
 HOLLYWOOD, FL 33019

Title: D () Delete Title: SECY (X) Change () Addition

 Name:
 BLAKEMORE, LYNN
 Name:
 BLAKEMORE, LYNN

 Address:
 1747 VAN BUREN ST. #870
 Address:
 1222 LINCOLN STREET

 City-St-Zip:
 HOLLYWOOD, FL 33020
 City-St-Zip:
 HOLLYWOOD, FL 33019

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: EDWIN N. BLAKEMORE PRES 04/24/2006