2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004
Secretary of State

DOCUMENT# P99000035106

Entity Name: FMC INSURANCE SERVICES, INC.

Current Principal Place of Business:

100 EXECUTIVE WAY, STE 220
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

PO BOX 3051
PONTE VEDRA BEACH, FL 320043057

New Mailing Address:

FEI Number: 59-3569618 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHEUVLIN, ROBERT A
100 EXECUTIVE WAY, STE 220
PONTE VEDRA BEACH, FL 32082

Name and Address of New Registered Agent:

SHEVLIN, ROBERT A
100 EXECUTIVE WAY, STE 220
PONTE VEDRA BEACH, FL 32082

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: ROBERT A. SHEVLIN 05/03/2004
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SHEVLIN, ROBERT A
Address: 100 EXECUTIVE WAY, STE 220
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ROBERT A. SHEVLIN PRES 05/03/2004
Electronic Signature of Signing Officer or Director Date