2005 FOR PROFIT CORPORATION
ANNUAL REPORT

SIGNATURE AND TYPED OR

FILED DOCUMENT # P9900060521 05 SEP 27 PM 1: 35 SELÉCTIVE INVESTMENT AND INSURANCE CORPORATION DEUNLTARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 1436 HIGHWAY 41 NORTH 1436 HIGHWAY 41 NORTH INVERNESS, FL 34450 INVERNESS, FL 34450 2. Principal Place of Bysiness 473 South CROFT AVE 3. Mailing Address 473 Soloth CROFF AVE Suite, Apt. #, etc Suite, Apt. #, etc CR2E034 (10/03) 05262005 Cha-P Applied For City & State City & State 4. FEI Number INVERNES INUERN ESS 59-3565862 Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired Citeus 34453 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HEW C. ZUMMO ZUMMO, MATHEW C 1436 HIGHWAY 41 NORTH INVERNESS, FL 34450 Zip Code 3 445 3 8. 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) nt and title if applicable. \$5.00 May Be FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Added to Fees Due by September 7, 2005 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete TITLE ☐ Addition TITLE Change ZUMMD, MATHEW C NAME NAME STREET ADDRESS 4621 NORTH LENA DR STREET ADDRESS BEVERLY HILLS, FL 34465 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE 00060085 ZUMMD, NATALYA N NAME NAME **150.00 09/29/05--01058--017 STREET ADDRESS 4621 NORTH LENA DR STREET ADDRESS CITY-ST-ZIP BEVERLY HILLS, FL 34465 CITY-ST-7IP Change Addition ☐ Delete TITLE TITLE NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered attico 1 SIGNATURE:

Date: 09/23/2005

To: Florida Dept., of State, Division of Corporations From: Selective Investment and Insurance Corp.

Subject: Annual 2005 report filing.

Department of Corporations:

I called today (09/23/2005) regarding having not received any confirmation back on my filing the 2005 annual report with an enclosed check for \$150.00, check # 1225. My bank had not received the check, or cashed it, so I became concerned and called to see if you received my report filing which was mailed on 09/04/2005 and if-you had cashed the check. A-representative from the department said that it was not received, and that I should immediately send a replacement check along with the report and a letter of explanation. Apparently the postal service has lost, or not delivered my annual report and payment, and I would like any late fees waived due to the problem being out of my control. Additionally, we did change our location and address, but never received any corporate filing forms from the sate at our new location.

Thank You,

Vłathew C. Zumpho

Registered Agent for Selective Investment and Insurance Corp.