2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2005
Secretary of State

DOCUMENT# P99000109549

Entity Name: C. K. INSURANCE & ASSOCIATES, INC.

Current Principal Place of Business:

9310 OLD KINGS RD. S.
#1702
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

9310 OLD KINGS RD. S.
#1702
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 59-3614985 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KORNEGAY, CHRISTIAN L
10135 GATE PARKWAY N.
#301
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

MCKINNON, CHERYL F
10371 DEERFOOT LANE NORTH
JACKSONVILLE, FL 32257 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: CHERYL F MCKINNON 02/22/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: KORNEGAY, CHRISTIAN L
Address: 10135 GATE PARKWAY N. #301
City-St-Zip: JACKSONVILLE, FL 32246

Title: VST (X) Delete
Name: MCKINNON, CHERYL F
Address: 10371 DEERFOOT LANE N
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MCKINNON, CHERYL F
Address: 10371 DEERFOOT LANE NORTH
City-St-Zip: JACKSONVILLE, FL 32257

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: CHERYL F. MCKINNON P 02/22/2005
Electronic Signature of Signing Officer or Director Date