2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S14132

DAYTONA BEACH, FL

City-St-Zip:

FILED Apr 05, 2004 Secretary of State

Entity Na	me: A ABA A	AMERICAN AUTO INSURANC	DE OF VOLUSIA, INC.				
Current P	rincipal Plac	e of Business:	New Prince	New Principal Place of Business:			
685 MASC DAYTONA	ON AVE A BEACH, FL	32117					
Current N	lailing Addre	ess:	New Maili	New Mailing Address:			
685 MASC DAYTONA	ON AVE A BEACH, FL	32117					
FEI Number: 59-3041598 FEI Number Applied For ()			FEI Number Not App	El Number Not Applicable () Certificate of Status Desir			
Name and	d Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
The above	ON AVE A BEACH, FL e named entity	32117 submits this statement for the	e purpose of changing i	ts registered of	fice or registered aç	gent, or both,	
	e of Florida.						
SIGNATUI	Electro	onic Signature of Registered A	gent		Date		
OFFICER	S AND DIRE	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip: Title: Name: Address:	GRAVES, SU 602 N NOVA DAYTONA BE D (PRINCE, WA	ROAD ACH, FL 32114) Delete	Title: Name: Address: City-St-Zip: Title: Name: Address:	GRAVES, SUSA 685 MASON AVI DAYTONA BEAC	E		

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: SUSAN GRAVES P 04/05/2004