2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P93000034843

ROBERT A. FEDORCHUK FINANCIAL & INSURANCE SERVICES, INC.



FILED Apr 27, 2006 08:00 AM Secretary of State

Principal Place of Business

730 N. PENINSULA DRIVE DAYTONA BEACH, FL 32118-3831 Mailing Address

PO BOX 2353

DAYTONA BEACH, FL 32115-2353



DO NOT WRITE IN THIS SPACE

03182006 Applied For 4. FEI Number Not Applicable 59-3278671

5. Certificate of Status Desired

\$8.75 Additional Fee Required

386)248-2931

CR2E034 (11/05)

5.	Name and	i Address	of Current	Registered	Agent

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FEDORCHUK, ROBERT A 730 N. PENINSULA DRIVE DAYTONA BEACH, FL 32118-3831

DO NOT WRITE IN THIS SPACE

No Chg-P

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.								
SIGNATURE_	Signature, typed or printed name of registered agent and title it	applicable (NOTE, Registered Agent signs	ure required when reinstating)	37KC				
FILE NOW!!! FEE (\$ \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	05/08/06-80104-020 150.00				
10.	OFFICERS AND DIREC	TORS						
TITLE NAME STREET ADDRESS CITY+ST-ZIP	PVST ROBERT A FEDORCHUK 730 N. PENINSULA DRIVE DAYTONA BCH, FL							
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE HAME STREET ADDRESS CITY+ST-ZIP			DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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								