

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **464182** (5)

1. Corporation Name  
**GULF COAST INSURANCE AGENCY, INC.**



Principal Place of Business  
**7370 COLLEGE PKWY. SUITE 214  
FT. MYERS FL 33907**

Mailing Address  
**7370 COLLEGE PKWY. SUITE 214  
FT. MYERS FL 33907**

21	22	23	24	25	26	27	28	29	30
2. Principal Place of Business					2a. Mailing Address				
Suite, Apt. #, etc.					Suite, Apt. #, etc.				
City & State					City & State				
Zip		Country			Zip		Country		

3. Date Incorporated or Qualified	3a. Date of Last Report
<b>10/28/1974</b>	<b>05/01/1995</b>
4. FIC Number	Applied For
<b>59-1556091</b>	Not Applicable
5. Certificate of Status Desired	<b>\$8.75 Additional Fee Required</b>
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	<b>\$5.00 May Be Added to Fees</b>
<input type="checkbox"/>	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**DILLARD, KENNETH C.  
450 KEENAN AVENUE  
FT. MYERS FL 33919**

81	Name
82	Street Address (P.O. Box Numbers Not Acceptable)
83	City
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE		DATE	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	TITLE	NAME
PD	DILLARD, KEN		
450 KEENAN AVENUE			
FT. MYERS FL			
T	SULLIVAN, SUSAN M		
860 DEQUESNE DR			
FT. MYERS FL			
VD	SULLIVAN, SUSAN M		
860 DEQUESNE DR			
FT. MYERS FL			
S	SULLIVAN, SUSAN M		
860 DEQUESNE DR			
FT. MYERS FL			

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Secretary  
Sandra K Dillard  
450 Keenan Avenue  
Fort Myers, FL 33919

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an affidavit.

SIGNATURE: *Kenneth C. Dillard* President 3/25/96 (941) 939-4853

CR2E034 (12/95)