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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 703321					
1. Corporation Name PINELLAS ASSOCIATION OF INSURANCE AGENTS, INC.					
Principal Place of Business 1543 S. HIGHLAND AVE. #273 CLEARWATER FL 33756			Mailing Address 1543 S. HIGHLAND AVE. #273 CLEARWATER FL 33756		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 12/13/1961 4. FEI Number 59-1966136 5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent BLANCHARD, GEORGE F. 1543 S. HIGHLAND AVE. #273 CLEARWATER FL 33756			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE <i>George F. Blanchard</i> George F. Blanchard, Executive Director 1-6-99 (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS TITLE D ☒ DELETE NAME RICE, JACK J STREET ADDRESS 13080 SOUTH BELCHER ROAD CITY-ST-ZIP LARGO FL TITLE D ☐ DELETE NAME WASSON, CHARLES STREET ADDRESS 11309 STARKEY ROAD CITY-ST-ZIP LARGO FL TITLE D ☐ DELETE NAME PORTER, NANCYE STREET ADDRESS 405 SOUTH DUNCAN AVENUE CITY-ST-ZIP CLEARWATER FL TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE D ☐ Change ☒ Addition 1.2 NAME Scott B. Gramling 1.3 STREET ADDRESS 3810 16th Street North 1.4 CITY-ST-ZIP St. Petersburg, Florida 33703 2.1 TITLE ☐ Change ☐ Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE D ☒ Change ☐ Addition 3.2 NAME Nancye E. Porter 3.3 STREET ADDRESS 630 Chestnut Street 3.4 CITY-ST-ZIP Clearwater, Florida 33756 4.1 TITLE ☐ Change ☐ Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE ☐ Change ☐ Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE ☐ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		

SIGNATURE:

Scott B. Gramling
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Scott B. Gramling Pres. 1-6-99

797-522-7777

Date

Daytime Phone #

CR2E037 (11/98)