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Jan 15 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 742278 (5)

1. Corporation Name

FLORIDA GOLD COAST CHAPTER OF THE SOCIETY OF CHA
RTERED PROPERTY AND CASUALTY UNDERWRITERS, INC.

Principal Place of Business

Mailing Address

118 SEA ISLAND TERRACE
BOCA RATON FL 33431118 SEA ISLAND TERRACE
BOCA RATON FL 33431-39073. Date Incorporated or Qualified
04/04/19783a. Date of Last Report
01/26/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

59-1843498

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DRESBACK, DONALD E.
118 SEA ISLAND TERRACE
BOCA RATON FL 33431

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

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☒ DELETE
NAME WILLSON, Nanci A
STREET ADDRESS 11687 PINTALL DR
CITY-ST-ZIP WELLINGTON FL1.1 TITLE VICE PRESIDENT ☐ Change ☒ Addition
1.2 NAME ROBERT CHERNIS
1.3 STREET ADDRESS 4700 NW BOCA RATON BLVD, STE 400
1.4 CITY-ST-ZIP BOCA RATON, FL 33487TITLE D ☐ DELETE
NAME CAMPBELL, ARTHUR B
STREET ADDRESS 5901 NE 21ST ROAD
CITY-ST-ZIP FORT LAUDERDALE FL2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE V ☐ DELETE
NAME NILSON, ROBERT CPCU
STREET ADDRESS 750 PARK OF COMMERCE DR
CITY-ST-ZIP BOCA RATON FL3.1 TITLE PRESIDENT ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME DRESBACK, DONALD
STREET ADDRESS 118 SEA ISLAND TERR
CITY-ST-ZIP BOCA RATON, FL 000004.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE TD ☐ DELETE
NAME MCKEE, IRENE
STREET ADDRESS 2737 N.E. 28TH STREET
CITY-ST-ZIP LIGHTHOUSE POINT FL5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME STEWART, VICTORIA
STREET ADDRESS 2290 NW BOCA RATON BLVD
CITY-ST-ZIP BOCA RATON FL6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/97

Date

(954) 781-5862

Daytime Phone * 0038648

CR2E037 (9/96)