	PROFIT DRPORATION NUAL REPORT 1996		Sandra Secret	RTMENT OF STATE B. Mortham ary of State CORPORATIONS	·	
DOCU 1. Corporat	JMENT # H	70011	(2)			
A FLO	ORIDA INSURANCE	AGENCY OF NO	ORTH FLORIDA,	INC		
Principal Pla	ace of Business	Mai	iling Address			
430 BRYN /		P.C	D. BOX 991 CEVILLE FL 32588			
	IER FL 32569				3. Date Incorporated or Qualified 08/07/1985	3a. Date of Last Report 05/12/1995
 Principal 	Place of Business	2a. 26	Mailing Address		4. FEI Number	Applied For
Suite, Ap	t. # etc	- ;	Suite, Apt. #, etc.		59-2612312 5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & Sta	ate	⊢¬	City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
7 ₁ p	Country	`	Zıp	Country	Trust Fund Contribution 8. This corporation has liability for	Added to Fees
4	9. Name and Addre	29 ss of Current Registe	red Agent	[30]	Florida Statutes 10. Name and Address of New Re	Yes No
	LLIOTT, SYLVIA ELAINE	Ē		81 Name		
	30 Bryn Athyn Ary Esther Fl 32569	}		<u> </u>	dress (P.O. Box Number is Not Acceptat	ole)
				83		
I Pursuan	d to the recognists of Cool	CO7.07.05		84 City		FL 85 Zip Code
I1. Pursuan office or agent 1	it to the provisions of Secti registered agent, or both am familiar with, and acce	ons 607 0502 and 607 in the State of Florida of the obligations of, S	.1508. Florida Statuti Such change was a Section 607.0505, Flo	es, the above named corp	poration submits this statement for the pi tion's board of directors. I becony accept	FL.
II. Pursuan office or agent I SIGNATURE	am familiar with, and acce	git the obligations of, S	Section 607.0505, Fic	es, the above named corporation of the corporation	lions toard of directors. Thereby accept	urpose of changing its registered the appoir timent as registered
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