

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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PROFIT CORPORATION
ANNUAL REPORT
910 - 1997

DOCUMENT # J31249

1. Corporation Name

LANGE LIFE AGENCY INC.

Principal Place of Business

Mailing Address

1532 OLD OKEECHOBEE ROAD, SUITE #104
WEST PALM BEACH, FL. 33409

3. Date Incorporated or Qualified

3a. Date of Last Report

1995

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

24

Country

29

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DONALD J. LANGE
4 OLD FENCE ROAD
PALM BEACH GARDENS, FL.
33418

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 607.0502 and 607.0508, 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

Signature must be printed name of registered agent. See Section 607.0505, Florida Statutes.

(NOTE: Registered Agent's signature required when reinstating)

May 20 1997

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME ~~PRESIDENT PRESIDENT~~
STREET ADDRESS ~~DONALD J. LANGE~~
CITY-ST-ZIP ~~DONALD J. LANGE 33418~~
~~4 OLD FENCE ROAD, PALM BEACH GARDENS, FL.~~

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-8-97 (561) 688-1020

Date

Daytime Phone #

CR2E034 (9/96)

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Financial Services • Life • Health • Disability

1532 OLD OKEECHOBEE RD., SUITE 104 • WEST PALM BEACH, FL 33409-5270 • (407) 688-1020

May 29, 1997

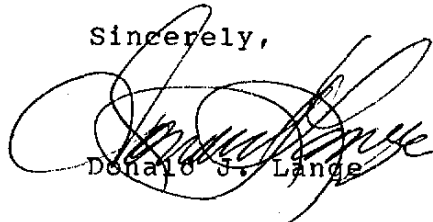
Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Fl. 32314
Attn: Leslie Sellers

Dear Ms. Sellers:

In reference to our phone conversation I am enclosing Annual Corporation form and check. As we discussed the reason for being late was due to the fact that billing never reached my current address. I assume that the billing went to my old address which was in Palm Beach Gardens, Florida, and was never forwarded or re-mailed to my current address. My last report of 1995 had my new and current address on it, as did my check.

If you have any further questions, please call me at above phone number.

Sincerely,



Donald J. Lange



Highest Standards of Professional Service