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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **K49104** **(8)**

1. Corporation Name

FIDELITY INSURANCE AGENCY, INC.

Principal Place of Business	Mailing Address
100 N.W. 12TH AVENUE DEERFIELD BEACH FL 33442	100 N.W. 12TH AVENUE LEGAL DEPT DEERFIELD BEACH FL 33442 US

3. Date Incorporated or Qualified: **12/05/1988**	3a. Date of Last Report: **05/01/1995**
4. FEI Number: **65-0087356**	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 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: _____ Signature, typed or printed name of registered agent and title, if any. (If CT is Registered Agent, signature required when submitting) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SREENAN, PATRICK 100 N.W. 12TH AVENUE DEERFIELD BEACH FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition see attached list
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MORAN, PATRICIA, G 100 N.W. 12TH AVENUE DEERFIELD BEACH FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MORAN, JANICE M. 100 N.W. 12TH AVENUE DEERFIELD BEACH FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GUNNELL, CASEY 100 N.W. 12TH AVENUE DEERFIELD BEACH FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition 300001755615 03/25/96-01020-002 ***200.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RICH, LAWRENCE S. 100 N.W. 12TH AVENUE DEERFIELD BEACH FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WHELAN, JOHN J. 100 N.W. 12TH AVENUE DEERFIELD BEACH FL	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (12/95)

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 address.

SIGNATURE: John J. Whelan Secretary 3/20/96 (954) 429-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Rev: 3/6/96

FIDELITY INSURANCE AGENCY, INC.

LIST OF OFFICERS AND DIRECTORS

TITLE	D
NAME	Moran, Janice M.
ADDRESS	100 N.W. 12th Ave.
CITY, STATE ZIP CODE	Deerfield Beach, FL 33442
TITLE	D
NAME	Rich, Lawrence S.
ADDRESS	100 N.W. 12th Ave.
CITY, STATE ZIP CODE	Deerfield Beach, FL 33442
TITLE	D
NAME	Moran, Patricia G.
ADDRESS	100 N.W. 12th Ave.
CITY, STATE ZIP CODE	Deerfield Beach, FL 33442
TITLE	P
NAME	Sreenan, Patrick
ADDRESS	100 N.W. 12th Ave.
CITY, STATE ZIP CODE	Deerfield Beach, FL 33442
TITLE	EV/GC
NAME	Brown, Colin
ADDRESS	100 N.W. 12th Ave.
CITY, STATE ZIP CODE	Deerfield Beach, FL 33442
TITLE	S
NAME	Whelan, John J.
ADDRESS	100 N.W. 12th Ave.
CITY, STATE ZIP CODE	Deerfield Beach, FL 33442
TITLE	T
NAME	Gunnell, Casey L.
ADDRESS	100 N.W. 12th Ave.
CITY, STATE ZIP CODE	Deerfield Beach, FL 33442

Fidelity Insurance Agency, Inc.
List of Officers and Directors
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TITLE	AT
NAME	McWilliams, Donna
ADDRESS	100 N.W. 12th Ave.
CITY, STATE ZIP CODE	Deerfield Beach, FL 33442