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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra & Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

L45723

1. Corporation	MENT # L4572 CLORIDA INSURANCE AGEN	(-)				1 (881/8)/ SJJ 8/88/ SJJJ 480/8	88 11(1 2:81) <b>8:8</b> () 6:8()	Ridja Billia Billia Jada
Principal Place of Business Mailing Address  C/O LESLEY MOULTON 1031 WEST MORSE BOULEVRD. SUITE 300 WINTER PARK FL 32789  Mailing Address  C/O LESLEY MOULTON 1031 WEST MORSE BOULEVRD. SUITE 300 WINTER PARK FL 32789					10			
			1100			3. Date incorporated or Qualified	3a. Date of Las	
	ace of Business	2a. Mailing Address				01/26/1990 4. FEI Number	05/01/	
21		26				59-2992871	}-	Applied For Not Applicable
Suite, Apt. i		Suite, Apt. #, etc.				5. Certificate of Status Desired		75 Additional
City & State	)	City & State				6. Election Campaign Financing	\$5	.00 May Be
Zip	Country Zip 25 29		Country 30			Trust Fund Contribution  8. This corporation has liability for in	ntangible tax under	rs 199.032,
	9. Name and Address of Curren	it Registered Agent	30]	T		Florida Statutes Yes  10. Name and Address of New Re		
				81 Nan		O. Name and Modiess of New Me	egisterea Agent	
	ON, LESLEY			82 Stree	et Address	dress (P.O. Box Number is Not Acceptable)		
1031 WI SUITE 3	EST MORSE BOULEVARD			83		, , ,		
WINTER PARK FL 32789								
				84 City	_			Zip Code
<ol> <li>Pursuant to or registere</li> </ol>	o the provisions of Sections 607.0502 ed agent, or both, in the State of Florid h, and accept the obligations of, Section	and 607.1508, Florida Statu	tes, the abc	Dve-named	corporation	submits this statement for the purp	oose of changing it	s registered office
familiar with SIGNATURE	h, and accept the obligations of, Section	on 607.0505, Florida Statute	zea by the c S.	corporation	i's board of	directors. I hereby accept the appoint	intment as register	€d agent. I am
s	Signature, typed or printed name of registered agent a		OTF: Registered	d Agent signatur	re required when	n reinstating)	DATE	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC		TORS IN 12
NAME	DP Barnes, James T. Jr.	☐ DELETE	. 1 1 1	-			☐ Chang	
STHEET ADDRESS	1031 WEST MORSE BLVD, S	TE 200	1.2 NA		_			
DITY-ST-ZIP	WINTER PARK FL	1E 300		TREET ADDRESS	8			
TILE	DS	☐ DELETE	2 1 TI	ITY-ST-ZIP	<del></del>			
3MA	MOULTON, LESLEY	_			Į.		C Chara	
THEET ADDRESS			2 2 NA				☐ Change	e Addition
ALL CONTROLLED	1031 W. MORSE BLVD., STE	300			,   ,		☐ Change	e 🔲 Addition
DITY-ST-ZIP	1031 W. MORSE BLVD., STE WINTER PARK FL	300	2.3 ST	AME	3		☐ Change	e Addition
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DIY-SI-ZIP  ITLE  IAME  IAME	1031 W. MORSE BLVD., STE WINTER PARK FL T GEIGER, MICHELE 1031 W. MORSE BLVD., STE WINTER PARK FL V GREGER, GERALD 1031 W. MORSE BLVD, SUITE	DELETE  300  DELETE  DELETE	2.3 ST 2.4 C(1) 3.1 T(1) 3.2 NA 3.3 ST 4.1 T(1) 4.2 NAI 4.3 GTF 4.4 C(1) 5.1 T(1) 5.2 NAI 5.3 STR 5.4 C(1)	AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME REET ADDRESS ITY-ST-ZIP TLE REET ADDRESS ITY-ST-ZIP TLE REET ADDRESS ITY-ST-ZIP TLE	s		☐ Change	Addition  Addition  Addition
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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:

Hesley Moulton

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-628-8700 Dayline Phone 1