FILE NOW: FILING FEE AFTER MAY 1ST IS \$650.00

PROFIT CORPORATION ANNUAL REPORT 1999 DOCUMENT # P29180			e Harris of State		FILEU SLEKE IARY OF EVISION OF COSE	t State Paration
1. Corporation Name AGENT INVESTORS HOLDING COMPANY					99 JUL 23 Ph	1 1:24
Principal Place of Business 201 ATP TOUR BLVJ. SVITE 150 PONTE VEDRA, FL 32082.					DO NOT WRITE IN TO crated or Qualified 03 — 1990	HIS SPACE
2. Principal Place of Business 2a. Mailing Address		}—, ·		4. FEI Number		Applied For
21 26 Suite, Apt. #, etc. Suite, A		Suite, Apt. #, etc.	#. etc.		3010380	\$8.75 Additional
22	n ' ⊨ '			5. Certifcate of	Status Desired	Fee Required
	City & State City & State				mpaign Financing	\$5.00 May Be
23 Zip	Country		Country	Trust Fund (Contribution stion owes the current year	Added to Fees
24	25	29 30	0]	Personal Pro	operty Tax	ŬYes □No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and	Address of New Register	ed Agent
PILICASTRO, GERALD 201 ATP TOUR BLUD. SUITE 150			83	Address (P.O. Box Num	ber is Not Acceptable)	
#	PONTE VEORA, F	4 32082	84 City		F	85 Zip Code
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of	f Florida. Such change was auth	orized by the corp	corporation submits this oration's board of director	statement for the purpose	of changing its registered pointment as registered
agent. I a	m familiar with, and accept the obligat	ons of, Section 607.0505, Florida	a Statutes		, , ,	,
SIGNATURE	Signature, typed or printed name of registered agent		gistered Agent signature r		DATE	
12.	OFFICERS AND	DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/C	CHANGES TO OFFICERS	AND DIRECTORS IN 12 0
NAME	C, P, T, D POLICASTRO, GERA	_	1.2 NAME		, RICHARD F.	
STREET ADDRESS	201 ATP TOUR BLV	D, STE ISO	1.3 STREET ADDRESS	201 ATP T	OUR BLVD . S	STE ISO
CITY-ST-ZIP	PONTE VEDRA, FL		1.4 CITY-ST-ZIP	PONTE VE	OUR BLVD., S ORA, FL	32082
TITLE NAME	S, D	DELETE	21 TITLE 22 NAME	77	0000294	Change Addition C
STREET ADDRESS	LEE, PETER R.	3LVA., # 150	23 STREET ADDRESS	• •		-01020002
CITY-ST-ZIP	PONTE VEDRA, 1	-c 32082	2 4 CiTY-ST-ZIP		*****61.2	
TITLE	D ANY CALL PAGE	☐ DELETE	3 1 TITLE			Change Addition
NAME STREET ADDRESS	CLARKSON, BAR	HWY, # 104	32 NAME 3.3 STREET ADDRESS			1
CITY-ST-ZIP	5066 AMHERST , MADISON HEIGHT.	S, VA 24572	34. CITY-ST-ZIP		halia	1
TITLE		☐ DELETE	4.1 TITLE		1/30	☐ Change ☐ Addition
NAME STOCET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		7	
STREET ADDRESS CITY-ST-ZIP			4.4 CITY-ST-ZIP		·	ļ
TITLE		[] DELETE	5 1 TITLE			Change C Addition
NAME			5.2 NAME			į (
STREET ADDRESS			53 STREET ADDRESS			
CITY-ST-ZIP TITLE		[] DELETE	61 TITLE	<u> </u>		☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			63 STREET ADDRESS			
CITY-ST-ZIP	ertify that the information sumilied with	this tiling does not qualify for the	6 4 City-ST-ZiP	in Section 119 07/3Viii	Florida Statutes I further o	partify that the information
14. I hereby certify that the information supplied with this time 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 is supplied with this time 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 of 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 chapted, or an an attachment with an address with all other like empowered.						
SIGNATURE: SOMETIME AND TYPES OF PRINTED HAME OF SEQUING OFFICER OF DIRECTOR Daylore Priors 8						