

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

**PROFIT CORPORATION ANNUAL REPORT 1998**



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

**FILED**  
**Feb 18 1998 8:00am**  
**Secretary of State**

**DOCUMENT # P96000014463 (9)**

1. Corporation Name  
**AUTO COVERAGE EXPERTS MACDILL, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
**2908 GANDY BOULEVARD TAMPA FL 33611**

Mailing Address  
**2908 GANDY BOULEVARD TAMPA FL 33611**

3. Date Incorporated or Qualified  
**02/15/1996**

4. FEI Number  
**59-3361801**

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 owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

2. Principal Place of Business

21 **3419 S. DALE MABRY HWY**

22 Suite, Apt. #, etc.

23 **TAMPA**

24 **33629**

25 **HILLS**

26 **3419 S. DALE MABRY HWY**

27 Suite, Apt. #, etc.

28 **TAMPA**

29 **33629**

30 **HILLS**

9. Name and Address of Current Registered Agent

**QUICK, JACKSON E**  
**2908 GANDY BLVD.**  
**TAMPA FL 33611**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)  
**3419 S. DALE MABRY HWY**

83

84 City **TAMPA** FL 85 Zip Code **33629**

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]* DATE **1/21/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PD</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>QUICK, KATHLEEN E</b>	1.2 NAME	
STREET ADDRESS	<b>2908 GANDY BOULEVARD</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>TAMPA FL 33611</b>	1.4 CITY-ST-ZIP	
TITLE	<b>VD</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>QUICK, JACKSON E</b>	2.2 NAME	
STREET ADDRESS	<b>2908 GANDY BOULEVARD</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>TAMPA FL 33611</b>	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 if changed, or on an attachment with address.

SIGNATURE *[Signature]* DATE **1/21/98**

CR2E034 (10/97)