

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V07174 (8)**

1. Corporation Name
GENTRY-DRANE INSURANCE AGENCY, INC.



Principal Place of Business: **2121 SEMORAN BLVD. APOPKA FL 32704 US**
Mailing Address: **1031 W. MORSE BLVD. SUITE 300 WINTER PARK FL 32789**

3. Date Incorporated or Qualified: **01/16/1992**
3a. Date of Last Report: **03/13/1995**

2. Principal Place of Business

2a. Mailing Address

4. FEI Number: **59-3104309**
Applied For: Not Applicable

22. Suite, Apt. #, etc. **(DELETE SUITE #)**

23. City & State

24. Zip

25. Country

26. Suite, Apt. #, etc.

27. City & State

28. Zip

29. Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MOULTON, LESLEY
1031 W. MORSE BLVD.
STE. 300
WINTER PARK FL 32789**

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 officer, director, or registered agent

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
DC	BARNES, JAMES T., JR.	1031 W. MORSE BLVD. #300	WINTER PARK FL	<input type="checkbox"/>
DVS	PRESTON, STEVEN	2121 SEMORAN BLVD.	APOPKA FL	<input type="checkbox"/>
DP	GREGER, GERALD J.	2121 SEMORAN BLVD.	APOPKA FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
D, C, S	BARNES, JAMES T. JR.	1031 W. MORSE BLVD. #300	WINTER PARK, FL 32789	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	PRESTON, STEVEN	2121 SEMORAN BLVD	APOPKA, FL 32704	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	DIRECTOR & VICE CHM	GREGER, GERALD J.	1031 W. MORSE BLVD. #300	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	DIRECTOR & PRESIDENT	LIEBKNECHT, DEBRA E.	2121 SEMORAN BLVD.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	ASST. SEC.	MOULTON, LESLEY	1031 W. MORSE BLVD. #300	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			WINTER PARK, FL 32789	<input type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J. Barnes
JAMES T. BARNES JR.

DIRECTOR

4/29/96

(407)628-8700

CR2E034 (12/95)