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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

(9)

DOCUMENT # V15786 ATLAS GENERAL AGENCY OF THE SOUTHEAST, INC. Principal Place of Business Mailing Address 500 W CYPRESS CREEK RD 500 W CYPRESS CREEK RD STE 450 STE 450 FT LAUD FL 33309 FT. LAUD FL 33309 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 02/21/1992 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 65-0316378 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

▼ Yes □ No Country Zip 30 Personal Property Tax due June 30. 29 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TARRENCE, DONALD J 2415 NW 31ST STREET Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33431** 83 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 # applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ___ DELETE 1.1 TITLE Change Addition TITLE TARRENCE, DONALD J 1.2 NAME NAME 2415 NW 31ST STREET STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-\$T-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE TARRENCE, DONALD J 2.2 NAME NAME 2415 NW 31ST STREET STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE 3.1 TITLE Change Addition TITLE TARRENCE, BRENDA S. NAME 3.2 NAME 2415 NW 31ST ST STREET ADDRESS 3.3 STREET ADDRESS **BOCA RATON FL** 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change ___ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP TITLE DELETE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

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

6.4 CITY-ST-ZIP

TALLENCE 1/5/98 (954) 351-9600 SIGNATURE:

FILED

Jan 30 1998 8:00am

Secretary of State