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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 237658

PALM LANE INSURANCE CORPORATION

						<u> </u>
Principal Plac	e of Business	Mailing Address			i (design trade state (401) dittel bildt (401) di	Bri Bibit dibit dibit arnit minti tant
6620 NW 41 ST 6620 NW 41 ST						er som er reger som som
CORAL SPRINGS FL 33067 CORAL SPRINGS FL 33067			7		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed	
					06/23/1960	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		59-0901877	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certifcate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes the current year	r Intangible
24	25	29	30		Personal Property Tax.	☐ Yes ☐ No
•	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Register	red Agent
1404		, •	8	1 Name		
	IAMARA, JOANNE		-	2 Street Ad	dress (P.O. Box Number is Not Acceptable)	
	NW 41 STREET		ľ	2 Sileer Au	uress (F.O. Box Number is Not Acceptable)	e a been a for a second state of the
COR	IAL SPRINGS FL 33067		8	3		3.1 Year (1995) 11 11 11 11 11 11 11 11 11 11 11 11 11
			ļ			
			8	4 City	F	Zip Code
11 Pursuant	to the provisions of Sections 607.05	502 and 607.1508. Florida Statut	tes, the abo	ve-named co	rporation submits this statement for the purpose	of changing its registered
office or n	egistered agent, or both, in the Stat m familiar with, and accept the oblic	e of Florida. Such change was a	authorized b	y the corpora	tion's board of directors. I hereby accept the ap	pointment as registered
_	m lamiliar with, and accept the oblig	gations or, Section 607.0505, Fid	mida Statute	is.	•	to the second
SIGNATURE						
	Signature, typed or printed name of registered as	gent and title if applicable. (NOTE	E: Registered Ac	ent signature requi	ired when reinstating) (2.3.1	
	Signature, typed or printed name of registered ag	gent and title if applicable. (NOTE		ent signature requi	ADDITIONS/CHANGES TO OFFICERS	
			13.		ADDITIONS/CHANGES TO OFFICERS	
12.	OFFICERS A	AND DIRECTORS	13.			AND DIRECTORS IN 12
12. TITLE NAME	OFFICERS A S SHERMAN, ALVIN	AND DIRECTORS	13. 1.1 TITLE 1.2 NAME		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS	OFFICERS A S SHERMAN, ALVIN 6620 NW 41 STREET	AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STRE	ET ADDRESS	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY	ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D	AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE	ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME	ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH 6620 NW 41 STREET	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE	ET ADDRESS ST-ZIP :	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY	ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition  Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH 6620 NW 41 STREET CORAL SPRINGS FL	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE	ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH 6620 NW 41 STREET CORAL SPRINGS FL V ROBINS, BARBARA FINK	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition  Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH 6620 NW 41 STREET CORAL SPRINGS FL V ROBINS, BARBARA FINK 6620 NW 41 STREET	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE	ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH 6620 NW 41 STREET CORAL SPRINGS FL V ROBINS, BARBARA FINK 6620 NW 41 STREET CORAL SPRINGS FL	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY	ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAMIE STREET ADDRESS CITY-ST-ZIP TITLE	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH 6620 NW 41 STREET CORAL SPRINGS FL V ROBINS, BARBARA FINK 6620 NW 41 STREET CORAL SPRINGS FL P	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE	ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition  Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH 6620 NW 41 STREET CORAL SPRINGS FL V ROBINS, BARBARA FINK 6620 NW 41 STREET CORAL SPRINGS FL P MCNAMARA, JOANNE	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAME	ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAMIE STREET ADDRESS CITY-ST-ZIP TITLE	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH 6620 NW 41 STREET CORAL SPRINGS FL V ROBINS, BARBARA FINK 6620 NW 41 STREET CORAL SPRINGS FL P MCNAMARA, JOANNE 6620 NW 41 STREET	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAME	ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH 6620 NW 41 STREET CORAL SPRINGS FL V ROBINS, BARBARA FINK 6620 NW 41 STREET CORAL SPRINGS FL P MCNAMARA, JOANNE	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY-	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH 6620 NW 41 STREET CORAL SPRINGS FL V ROBINS, BARBARA FINK 6620 NW 41 STREET CORAL SPRINGS FL P MCNAMARA, JOANNE 6620 NW 41 STREET	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY- 5.1 TITLE 5.1 TITLE	ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH 6620 NW 41 STREET CORAL SPRINGS FL V ROBINS, BARBARA FINK 6620 NW 41 STREET CORAL SPRINGS FL P MCNAMARA, JOANNE 6620 NW 41 STREET	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.1 TITLE 5.2 NAME 5.3 NAME 5.3 NAME 5.4 NAME 5.4 NAME 5.5 NAME 5.5 NAME 5.5 NAME 5.5 NAME 5.5 NAME 5.1 TITLE 5.5 NAME	ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH 6620 NW 41 STREET CORAL SPRINGS FL V ROBINS, BARBARA FINK 6620 NW 41 STREET CORAL SPRINGS FL P MCNAMARA, JOANNE 6620 NW 41 STREET	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STRE 5.3 STRE	ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH 6620 NW 41 STREET CORAL SPRINGS FL V ROBINS, BARBARA FINK 6620 NW 41 STREET CORAL SPRINGS FL P MCNAMARA, JOANNE 6620 NW 41 STREET	DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STRE 5.4 CITY- 5.3 STRE 5.4 CITY-	ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Addition  Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	S SHERMAN, ALVIN 6620 NW 41 STREET CORAL SPRINGS FL D FINK,RUTH 6620 NW 41 STREET CORAL SPRINGS FL V ROBINS, BARBARA FINK 6620 NW 41 STREET CORAL SPRINGS FL P MCNAMARA, JOANNE 6620 NW 41 STREET	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STRE 5.3 STRE	ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1.19.07(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 an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

**FILED** 

Feb 18, 1999 8:00am

**Secretary of State** 

02-18-1999 90061 014 \*\*\*150.00