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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 325928

(0)

RUSS JORDAN INSURANCE AGENCY INC.

Principal Place of Business Mailing Address 49 EAST AVENUE NORTH SARASOTA FL 34237 3. Date Incorporated or Qualified 3a. Date of Last Report 02/01/1968 03/05/1996 2. Principal Place of Business 4. FEI Number . Mailing Address Applied For TRAWICK, P.A. 26 59-1212445 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 4019 P.O. Box 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be $\mathbf{F}1$ 28|Sarasota, 23 Trust Fund Contribution Added to Fees Zio Country Country Ζιρ 8. This corporation has liability for intangible tax under s. 199.032, Yes No 34230 24 25 29 30 USA Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent JORDAN, RUSSELL, C., JR 81 Name 49 EAST AVE. NORTH 62 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34237 **B3** 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, typod or pointed name of registered agent and title if applicable (NOTE: Registered Agent eignature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE MILE 1.1 TITLE Change Addition JORDAN JR.RUSSELL C NAME 12 NAME 49 EAST AVENUE, N. STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL CITY-ST-7IP 1.4 CiTY - ST-ZIP DELETE **Change** DILE 2.1 TITLE Addition Jordan, Gregory 49 east ave. N. Jordan, Gregory NAME 2.2 NAME 49 EAST AVE. N STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL SARABOTA, FL 34237 CBY-\$1-26 2. 4 CITY - ST - ZIP DELETE TITLE 3 1 TITLE Change Addition JORDAN, JUDITH, J JOHNIOUT, UAGOST MAME 3.2 NAME 49 EAST AVE., N STREET ADDRESS 49 EAST AVE. N 3.3 STREET ADDRESS SARASOTA FL SARASOTA, FL 34237 CITY+ST-ZIP 3.4. CITY - \$1 - ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 0/11 - ST - 7/P 5.4 CITY-ST-ZIP DELETE THILE 6.1 TITLE Change Addition 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

14. I do 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 an address.

64 CITY-ST-ZIP

SIGNATURE:

DESCRIPTION OF THE PROPERTY OF THE BEST OF

4/29/97 (

(941)955-011

FILED

May 13 1997 8:00am

Secretary of State