

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 #

1. Corporation Name

CHASEFED INSURANCE.CO.

398568

Principal Place of Business

**% CHASE FEDERAL BANK
7300 N. Kendall Dr.
Miami, Fl. 33156
US**

Mailing Address

**% CHASE FEDERAL BANK
7300 N. Kendall Dr.
Miami, Fl. 33156
US**

2. Principal Place of Business

21c/o CHASE FEDERAL BANK

2a. Mailing Address

26 CHASE FEDERAL BANK

Suite, Apt. #, etc

Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

1. Name and Address of Current Registered Agent

**Meryl Wolfson
%Chase Federal Bank
7300 N. Kendall Dr.
Miami, Fl. 33156**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

3. Date Incorporated or Qualified

3-31-1972

3a. Date of Last Report

4. FEI Number

59-1385825

Applied For

Not Applicable

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

10. Name and Address of New Registered Agent

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. Thereby 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 the corporation

(If the Registered Agent's signature is required when filed)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	Thomas A. Cooper	
STREET ADDRESS	7300 N. Kendall Dr.	
CITY-ST-ZIP	Miami, Fl. 33156	
TITLE	V	<input type="checkbox"/> DELETE
NAME	Charles L. Clements III	
STREET ADDRESS	7300 N. Kendall Dr.	
CITY-ST-ZIP	Miami, Fl. 33156	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	Richard D. Hessinger	
STREET ADDRESS	7300 N. Kendall Dr.	
CITY-ST-ZIP	Miami, Fl. 33156	
TITLE	V	<input type="checkbox"/> DELETE
NAME	Allen Yans	
STREET ADDRESS	7300 N. Kendall Dr.	
CITY-ST-ZIP	Miami, Fl. 33156	
TITLE	DCFO	<input type="checkbox"/> DELETE
NAME	Donald E. Baker	
STREET ADDRESS	7300 North Kendall	
CITY-ST-ZIP	Miami, Fl. 33156	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Laurence J. Trapp	
STREET ADDRESS	7300 N. Kendall Dr.	
CITY-ST-ZIP	Miami, Fl. 33156	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-ST-ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-ST-ZIP	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-ST-ZIP	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-ST-ZIP	
17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-ST-ZIP	

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***225.00**

14. I do hereby certify that the information on 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: *Donald E. Baker*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald E. Baker, Chief Financial Officer 4/30/96

Date: (200) 670-7600

CR2E034 (12/95)

*S-B-96
JK*