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Jan 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 515336 (6) 1. Corporation Name ILER, WALL & SHONTER, INSURANCE, INC.			
Principal Place of Business 800 49TH STREET N. ST PETERSBURG FL 33710 US		Mailing Address PO BOX 14448 ST. PETERSBURG FL 33733 US	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	
9. Name and Address of Current Registered Agent WALL, JAMES KIPPS 800 49TH STREET N. ST PETERSBURG FL 33710		10. Name and Address of New Registered Agent 81 Name SHONTER, CLAIRE 82 Street Address (P.O. Box Number is Not Acceptable) 800 49th Street N 83 84 City ST Petersburg FL 85 Zip Code 33710	
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 <i>Claire Shonter</i> SHONTER, CLAIRE VP/SECTY 1-5-98 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS TITLE PD NAME ILER, RICHARD LEE STREET ADDRESS 800 49TH STREET N. CITY-ST-ZIP ST PETERSBURG FL 33710 TITLE VD NAME WALL, JAMES KIPPS STREET ADDRESS 800 49TH STREET N. CITY-ST-ZIP ST PETERSBURG FL 33710 TITLE S NAME SHONTER, CLAIRE STREET ADDRESS 800 49TH STREET N. CITY-ST-ZIP ST PETERSBURG FL 33710 TITLE VP NAME SHONTER, RICHARD J STREET ADDRESS 800 49TH STREET N. CITY-ST-ZIP ST PETERSBURG FL 33710 TITLE VP NAME ANTEKEIER, SUSAN B STREET ADDRESS 800 49TH ST NORTH CITY-ST-ZIP ST PETERSBURG FL TITLE VP NAME BUSCH, RICHARD J STREET ADDRESS 800 49TH ST NORTH CITY-ST-ZIP ST PETERSBURG FL		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE Secty/VP 3.2 NAME SHONTER, CLAIRE 3.3 STREET ADDRESS 800 49th ST N 3.4 CITY-ST-ZIP ST Petersburg, FL 33710 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE VP 5.2 NAME W. Allen Klutts 5.3 STREET ADDRESS 800 49th ST No 5.4 CITY-ST-ZIP ST Petersburg, FL 6.1 TITLE VP 6.2 NAME JOHN P. COGGESHALL 6.3 STREET ADDRESS 800 49th ST No 6.4 CITY-ST-ZIP ST Petersburg, FL	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/29/1976	
4. FEI Number 59-1711216	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Claire Shonter* CLAIRE SHONTER VP/SECTY 1-5-98 (813) 337-7070

CR2E034 (10/97)