

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 18 PM 5:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 538189 (2)

1. Corporation Name

MOTORCYCLE INSURANCE AGENCY, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 06/28/1977 3a. Date of Last Report 04/13/1994

4. FEI Number 59-1754485 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. 100.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

AGG-60-
2900 SUN BANK CENTER
200 S. ORANGE AVE
ORLANDO FL 32801

81 Name RAX CO.
82 Street Address (P.O. Box Number is Not Acceptable) c/o Mahoney Adams & Criser, P.A.
83 50 N. Laura St., 3400 Barnett Center
84 City Jacksonville FL 85 Zip Code 32202

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, 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 607.0509, Florida Statutes.

SIGNATURE

David A. Webster

David A. Webster, V.P.

3/14/95

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HILL, R C JR
STREET ADDRESS	3407 W COLONIAL DRIVE
CITY, ST, ZIP	ORLANDO, FLORIDA 00000
TITLE	D
NAME	RUPP, RONALD M
STREET ADDRESS	4709 WATCH HILL COURT
CITY, ST, ZIP	ORLANDO, FLORIDA 00000
TITLE	V
NAME	VIHTELIC, LEONARD
STREET ADDRESS	3407 W COLONIAL DR.
CITY, ST, ZIP	ORLANDO FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 provided by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE: Leonard Vihtelic

3/14/95

407/299-9215

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR