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Feb 05, 1999 8:00am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 550979

1. Corporation Name
BOB O'NEILL INSURANCE AGENCY, INC.

Principal Place of Business
2711 MOSS OAK DRIVE
SARASOTA FL 34231

Mailing Address
2711 MOSS OAK DRIVE
SARASOTA FL 34231



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/08/1977

4. FEI Number

59-1779322

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

O'NEILL, ROBERT J.
2711 MOSS OAK DR.
SARASOTA FL 34231

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME FLYNN, VIRGINIA O
STREET ADDRESS 109 GODSPEED LANE
CITY-ST-ZIP WILLIAMSBURG VA

TITLE D ☐ DELETE
NAME WIELGORECKI, MARTHA JEAN
STREET ADDRESS 1923 WISTERIA ST.
CITY-ST-ZIP SARASOTA FL

TITLE DV ☐ DELETE
NAME O'NEILL, RUTH L
STREET ADDRESS 2711 MOSS OAK DRIVE
CITY-ST-ZIP SARASOTA FL

TITLE ST ☐ DELETE
NAME KENDALL, LUCILLE M
STREET ADDRESS 2625 MOSS OAK DR.
CITY-ST-ZIP SARASOTA FL

TITLE PD ☐ DELETE
NAME O'NEILL, ROBERT J
STREET ADDRESS 2711 MOSS OAK DRIVE
CITY-ST-ZIP SARASOTA FL

TITLE D ☐ DELETE
NAME HEUSNER, KATHERINE O
STREET ADDRESS 2811 AINTREE LANE, #E104
CITY-ST-ZIP NAPLES FL

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 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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.

SIGNATURE: *Robert J. O'Neill* PRESIDENTED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/99

Date

941-923-9370

Daytime Phone #

CR2E034 (11/98)