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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 555462

(1)

FILED Mar 03 1998 8:00am Secretary of State

	CE INSURANCE COMPANY				
Principal Plac	e of Business	Mailing Address		L IBBABL WIEDE Brings Belts Brail Affisa 1161 grant gi	imte Midit Minti millif hifff fiff.
1401 8TH AVE WEST BRADENTON FL 34205 US		P.O. BOX 9729 BRADENTON FL 34206-9729 US		DO NOT WRITE IN THE	S SPACE
				3. Date Incorporated or Qualified	
				12/16/1977	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1786118	Not Applicable
Suite, Apt.	#, elc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zıp	Country	Zip	Country	8. This corporation owes or has paid the c	current year Intangible
24	25		30	Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registere	d Agent
CR	IUIKSHANK, DAVID C		61 Name		1
1401 8TH AVE WEST			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
BRADENTON FL 34205					
			83		
			84 City	<u> </u>	85 Zip Code
11. Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Statutes	the above-named corr		
office or r	egistered agont, or both, in the State	of Florida, Such change was au	thorized by the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the appropriate the statement for the purpose	ppointment as registered
	Downe C. CRui	DAVII	D. C. CRUTKSHA	NK, PRESIDENT 2/	19/98
SIGNATURE	Signature, typed or printed name of registered au	4 17	Registered Agent signature requir	-	
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AT	ND DIDECTORS IN 10
TITLE				ADDITIONO/CHANGES TO OFFICE IN A	NU DIRECTORS IN 12 14
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Indicated on this annual report or supplied with this limit does not quality for the exemption stated in Section 1.19.07(3)(i). Florida Statutes. I further certify that the informatic 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:

ROSETTA WAAG, SECRETARY

1-800-70-8423

Cht 230