

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

FILED
Mar 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 846952 (0)

1. Corporation Name

ATLANTA INSURANCE BROKERS, INC.

Principal Place of Business

3169 HOLCOMB BRIDGE RD.
NORCROSS GA 30071

Mailing Address

3169 HOLCOMB BRIDGE RD.
NORCROSS GA 30071

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/15/1980

4. FEI Number

58-1093701

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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	SVS	<input type="checkbox"/> DELETE
NAME	KIMSEY, JOHN P.	
STREET ADDRESS	3169 HOLBOMB BRIDGE RD	
CITY-ST-ZIP	NORCROSS, GA 00000	

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	LOWE, ROBERT L	
STREET ADDRESS	3169 HOLCOMB BRIDGE RD	
CITY-ST-ZIP	NORCROSS, GA 00000	

TITLE	VPT	<input type="checkbox"/> DELETE
NAME	SCHAFER, DAVID MARK	
STREET ADDRESS	3169 HOCOMB BRIDGE RD.	
CITY-ST-ZIP	NORCROSS GA	

TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	GLOVER, LARRY MICHAEL	
STREET ADDRESS	3169 HOCOMB BRIDGE RD.	
CITY-ST-ZIP	NORCROSS GA	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	PD
2.3 STREET ADDRESS	STEVENS, EDWARD
2.4 CITY-ST-ZIP	3169 HOLCOMB BRIDGE ROAD

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	NORCROSS, GA
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	VP
4.3 STREET ADDRESS	WYATT, EDWARD
4.4 CITY-ST-ZIP	3169 HOLCOMB BRIDGE ROAD

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	NORCROSS, GA 30071
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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)(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.

CR2E034 (10/97)