

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

FILED
May 15 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 # **F07396** (7)

1. Corporation Name
PROGRAM UNDERWRITERS THREE, INC.



Principal Place of Business 136 N. MOON AVE. BRANDON FL 33510 US	Mailing Address 3700 COCONUT CREEK PKWY COCONUT CREEK FL 33066-1616 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/02/1980	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-2068864		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	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			

9. Name and Address of Current Registered Agent BUTO, LAWRENCE % PROGRAM UNDERWRITERS 3700 COCONUT CREEK PARKWAY COCONUT CREEK FL 33066		10. Name and Address of New Registered Agent	
		81 Name ZISSELMAN, ARNOLD % Program Underwriters	
		82 Street Address (P.O. Box Number is Not Accepted) 3700 Coconut Creek Parkway	
		83	
		84 City Coconut Creek	85 Zip Code FL 33066

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 *ARNOLD ZISSELMAN* **4/22/98**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input checked="" type="checkbox"/> DELETE	1.1 TITLE BUTO, DONNA M.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME BUTO, LAWRENCE J		1.2 NAME	
STREET ADDRESS 4200 NW 101 DRIVE		1.3 STREET ADDRESS 4200 N.W. 101 DRIVE	
CITY-ST-ZIP CORAL SPRINGS FL		1.4 CITY-ST-ZIP CORAL SPRINGS, FL 33065	
TITLE DST	<input type="checkbox"/> DELETE	2.1 TITLE CST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BUTO, FRANCES T		2.2 NAME	
STREET ADDRESS 4200 NW 101 DRIVE		2.3 STREET ADDRESS	
CITY-ST-ZIP CORAL SPRINGS FL		2.4 CITY-ST-ZIP 33065	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME BUTO, STEPHEN	
STREET ADDRESS		3.3 STREET ADDRESS 11184 Lake View Drive	
CITY-ST-ZIP		3.4 CITY-ST-ZIP CORAL SPRINGS, FL 33071	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)