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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

SIGNATURE

DOCUMENT # F49536

1. Corporation Name

(8)

CORPORATE INSURANCE PLANNING COMPANY

Principal Place of Business Mailing Addr 601 BAYSHORE BLVD. SUITE 900 601 BAYSH P. O. BOX 556 P. O. BOX 57AMPA FL 33601 TAMPA FL 33601 TAMPA FL 35CO			D. SUITE 900			
				3. Date incorporated or Qualified 11/01/1981	3a. Date of La:	•
z. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	1 00,0 1,	Applied For
Suite, Apt	# etc	26		59-2129834	<u></u>	Not Applicable
2]	.,	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8	.75 Additional
City & State	te	City & State			F	ee Required
]		28		6. Election Campaign Financing		.00 May Be
Zip	Country	Zipi	Country	Trust Fund Contribution	AC	ded to Fees
<u> </u>	25	29	30	This corporation has liability for it Florida Statutes		ors 199.032,
	Name and Address of Currer	nt Registered Agent		10. Name and Address of New Ri		
THOMAS	no.		81 Nanie			
THOMAS			82 Street Add	ress (P.O. Box Number is Not Acceptable		
101 E KENNEDY BLVD. SUAITE 4100 TAMPA FL 33602					u,	
			83			
IAMICA C	rt 33002		84 City			
1 Pursuant t	to the provisions of Section 1977 or on		1 1 '	oration submits this statement for the purp	FL 85	Zip Code
GNATURE _	Syrutire typed or ported rate of registered agent OFFICERS ANE PS	DIRECTORS	OTE Registered Agent signature require 13.	at wher recisions about 100 Members 100 OFFIC	DATE DERS AND DIREC	TORS IN 12
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						je 🔲 Addition
			1.2 NAMē			e L Addition
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REET ADDRESS Y-ST-ZIP		T] Decere	1.3 STREET ADDRESS			e L Addition
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(Jak. Daytine Phone #

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR