

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 FEB 27 AM 12:10

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # F80493 (2)

1. Corporation Name

RUTLAND INSURANCE AGENCY, INC.

Principal Place of Business

**109 W. LAKEVIEW ST.
P.O. BOX 760
LADY LK FL 32158-0760
US**

Mailing Address

**109 W. LAKEVIEW ST.
P.O. BOX 760
LADY LK FL 32158-7760
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/10/1982

3a. Date of Last Report

03/29/1994

4. FEI Number

59-2202279

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ 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

**RUTLAND, FLORENCE B.
109 W. LAKEVIEW ST.
P.O. BOX 760
LADY LAKE FL 32158-7760**

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 sign the provisions of, Sections 607.0502, Florida Statutes.

SIGNATURE

FLORENCE B. RUTLAND, Pres. 2-22-95

(NOTE: Registered Agent signature required when registering)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE
NAME

STREET ADDRESS

CITY - ST - ZIP

**P
RUTLAND, FLORENCE B.
109 W. LAKEVIEW ST.
LADY LAKE FL**

TITLE
NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE
NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE
NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE
NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE
NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(6)(b), 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 liquidator of the corporation; and that my signature shall be subject to the provisions of Chapter 197, Florida Statutes, and that my name appears in Block 12 or Block 13 if I am an officer or director of the corporation.

SIGNATURE:

FLORENCE B. RUTLAND 2-22-95

(Signature and typed name of signing officer or director)

(Date)

(Signature Fee)

704-753-3255

0404032 FP