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

PROFIT CORPORATION ANNUAL REPORT

1997

I am an officer or director of the appears in Block 12 or Block



FLORIDA DEPARTMENT OF STATE

FILED

Jan 31 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9600001414 (9)

BUNKER HILL INSURANCE AGENCY, INC.

Principal Place of Business Mailing Address 820 GESSNER ROAD, SUITE 150 820 GESSNER ROAD, SUITE 150 HOUSTON TX 77024 HOUSTON TX 77024-4258 3. Date Incorporated or Qualified 3a. Date of Last Report 03/20/1996 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 9821 Katy Freeway 9821 Katy Freeway 76-0165558 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Suite 850 Suite 850 City & State City & State \$5.00 May Be Election Campaign Financing Trust Fund Contribution Added to Fees 23 Houston, TX 28 Houston, TX Country Country 8. This corporation has liability for intangible tax under s. 199.032, Zιp Yes No 77024 - 1206 25 U.S.A. 29 77024 - 1 9. Name and Address of Current Registered Agent Florida Statutes 77024-1206 S.A 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 City 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. Lem familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. S!GNATURE Signature, typed or printed name of registered again and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition ■ DELETE 1.1 TITLE TITLE CD OSTER, SHELDON I 1.2 NAME NAME 820 GESSNER ROAD, SUITE 150 1.3 STREET ADDRESS STREET ADDRESS 9821 Katy Freeway, Suite 850 **HOUSTON TX 77024** 1.4 CITY - ST - ZIP CITY-ST-ZIP Houston, TX 77024-1206 X Change Addition PSD DELETE 21 TITLE TITLE THOMAS, RAYMOND L 2.2 NAME NAME 820 GESSNER ROAD, SUITE 150 9821 Katy Freeway, Suite 850 2.3 STREET ADDRESS STREET ADDRESS **HOUSTON TX 77024** Houston, TX 77024-1206 2.4 CITY-ST-ZIP CHY-\$1-ZIP Y Change Addition Ē۷ ■ DELETE 31 TITLE TOTAL POSTON, PAUL E 3.2 NAME NAME 820 GESSNER ROAD, SUITE 150 3.3 STREET ADDRESS 9821 Katy Freeway, Suite 850 STREET ADDRESS **HOUSTON TX 77024** Houston, TX 77024-1206 34 CITY-ST-ZIE CITY - \$1 - 709 Change Addition DELETE 4.1 TITLE THE THOMAS, GARY R 4 2 NAME NAME 820 GESSNER ROAD, SUITE 150 4.3 STREET ADDRESS STREET ADDRESS 9821 Katy Freeway, Suite 850 **HOUSTON TX 77024** 4.4 CITY-ST-ZIP CITY - ST - ZIP Houston, TX 77024-1206 Change Addition □ DELETE 5.1 TITLE THE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY - \$1 - ZIP CHY+S1-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP

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 contraction of the deliver or trust of empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

14. I do 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