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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

1, Corporation	H F. MCDERMOTT IN	1902 Isurance agency.	(<i><)</i> INC.					
Principal Plac	e of Business	Mailing Addre	ss				I DIAN IDDI	
4500 BELVEC	DERE RD	4500 BELVEO	ERE RO					
SUITE E		SUITE E						
WEST PALM BEACH FL 33415		WEST PALM	WEST PALM BEACH FL 33415			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 09/29/1982		
	lace of Business	2a. Mailing Ad	dress				plied For	
21 Suite April # ate		26					t Applicable	
Suite, Apt. #, etc.		├ ¬	Suite, Apt. #, etc.			5. Certificate of Status Desired		
City & State			City & State					
23		28	├ ─┐			6. Election Campaign Financing \$5.00 Trust Fund Contribution Added t	• ,	
Zip	Country Zi		Country			8. This corporation owes or has paid the current year Inte		
24	25 29 30				Personal Property Tax due June 30. X Yes No			
		of Current Registered Agen				10. Name and Address of New Registered Agent		
MC	DERMOTT, JOSEPH F.			81	Name			
4500 BELVEDERE RD., S-E				82	Street A	Address (P.O. Box Number is Not Acceptable)		
WEST PALM BEACH FL 33415				102	OllogiA	Address (1.0. box Norhber is Not Acceptable)		
				83				
				84	City	85 Zip C	aho:	
					•	FL []		
11. Pursuant office or agent La	to the provisions of Sections egistered agent, or both, in to m familiar with, and accept to the section of the section of	607.0502 and 607.1508, Flo the State of Florida. Such ch the obligations of Section 60	rida Statutes, thange was autho 27,0505 Florida	ne above orized by Statutes	the corpo	corporation submits this statement for the purpose of changing its poration's board of directors. I hereby accept the appointment as	registered registered	
SIGNATURE		and dangering of Bootist of		0.0.0.0			ļ	
SIGIVATORE	Signature, typed or printed name of ro	gistered agent and title if applicable	(NOTE: Reg	Istered Age	nt signature r	required when reinstating) DATE		
12.		ERS AND DIRECTORS		13.	·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
TITLE	PD	-	DELETE	1.1 TITLE	- 1	Change	☐ Addition	
NAME	MCDERMOTT, JOSEP	HF.	l '	1.2 NAME	i			
STREET ADDRESS	2428 BIMINI DR.			1.3 STREET	ADDRESS			
CITY-ST-ZIP	W. PALM BEACH FL			1.4 CITY-S	T-ZIP	T OL	T Addition -	
TITLE	ST HADEDHOTT LINDA			2.1 TITLE	ĺ	L_] Change	Addition	
NAME	MCDERMOTT, LINDA 2428 BIMINI DR.	N.		2.2 NAME			•	
STREET ADDRESS	W. PALM BEACH FL			2.3 STREET	t t		}	
CITY-ST-ZIP TITLE	TI. FALM DEAUTI FL			2. 4 CITY-S 3.1 TITLE	1-21P	Change	Addition	
NAME		Ь		3.2 NAME		L Criange		
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-ZIP				3.4. CITY-S	- 1			
THILE				4.1 TITLE	1-211	Change	Addition	
NAME		-		4. 2 NAME	- 1			
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY - \$1	1			
TITLE				5.1 TITLE		Change	Addition	
NAME			.	5.2 NAME				
STREET ADDRESS				5.3 STREET .	ADDRESS		}	
CITY+ST-ZIP				5.4 CITY-SI		. na politica (14.5 - k 25.5) kiej nako a jednoj (14.5), nako je		
TITLE				61 MILE		Change	Addition	
MAME			3 3 4 4 3	CALIANE .		"国民主义"的"大学"。	İ	

14. Thereby 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 changes or on an attachment with an address.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

STREET ADDRESS

Feb 20 1998 8:00am

Secretary of State