

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

**FILED**  
**May 19 1998 8:00am**  
**Secretary of State**

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Kortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # H05601 (0)**

1. Corporation Name  
**AMBERG INSURANCE CENTER, INC.**



Principal Place of Business 1900 S. TAMiami TRAIL UNIT C PUNTA GORDA FL 33950 US	Mailing Address 1900 SOUTH TAMiami TRAIL UNIT C PUNTA GORDA FL 33950 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 1900 S. Tamiami Trail	26
22 Suite, Apt. #, etc. C	27
23 City & State Punta Gorda FL	28
24 Zip 33950	29
25 Country Charlotte	30

3. Date Incorporated or Qualified <b>05/30/1984</b>	
4. FEI Number <b>59-2415462</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**AMBERG, DAVID A.**  
**1900-C TAMiami TRAIL**  
**PUNTA GORDA FL 33950**

10. Name and Address of New Registered Agent

81 Name	David A. Amberg
82 Street Address (P.O. Box Number is Not Acceptable)	1900-C Tamiami Trail
83	
84 City	Punta Gorda, FL
85 Zip Code	33980

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: *David A. Amberg* **David A. Amberg** DATE: **4/8/98**

12. OFFICERS AND DIRECTORS

TITLE	PST	<input type="checkbox"/> DELETE
NAME	AMBERG, DAVID A.	
STREET ADDRESS	1900 S.TAMiami TR.,STE.C	
CITY-ST-ZIP	PUNTA GORDA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	AMBERG, DAVID A. JR	
STREET ADDRESS	1900 S.TAMiami TR.,STE.C	
CITY-ST-ZIP	PUNTA GORDA FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	AMBERG, PATRICIA A.	
STREET ADDRESS	1900 S.TAMiami TR.,STE.C	
CITY-ST-ZIP	PUNTA GORDA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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.

SIGNATURE: *David A. Amberg* **David A. Amberg** DATE: **4/8/98**

CR2E034 (10/97)