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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Principal Place of Business

H68728

(5)

Mailing Address

THE NICHOLAS INSURANCE GROUP, INC.

FILED Mar 26 1998 8:00am Secretary of State



29399 US 19 STE 290 CLEARWATER US		28399 US 19 N STE 280 CLEARWATER FL 34621 US			DO NOT WRITE IN THIS S 3. Date Incorporated or Qualified 07/30/1985	SPACE	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	ΤĀ	pplied For
21 2939	9 US 19 N.	26 20200 UC 10 N		59-2563151		ot Applicable	
Suite, Apt.		29300 US 19 N Suite, Apl. #, etc.				Additional	
22 Ste. 280 City & State		27 Ste. 280 City & State			Fee Required		
		H-1 '			6. Election Campaign Financing		May Be
23 Clea Zip	rwater, FL Country	[28] Clearwater	earwater, FL Country		Trust Fund Contribution		to Fees
—		Zip			8. This corporation owes or has paid the curr		
24 3376	1 25 USA 9. Name and Address of Current		30 US	A	Personal Property Tax due June 30. 10, Name and Address of New Registered A		_ No
DIANA, NICHOLAS 20399 US 19 N STE 280 CLEARWATER FL 34621 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 accept the obligations of Section 607.0505, Florida Statutes.							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12
TITLE	P	DELETE	1.1 TITLE		ADDITION OF A TOLLIG AND	Change	Addition
NAME	DIANA, VINCENT	_	1.2 NAME				
STREET ADDRESS	29399 US 19 N, STE 280		1.3 STREET ADDRESS				
i	CLEARWATER FL						
CITY-ST-ZIP TITLE	VI	DELETE	1.4 CITY - S	ST-ZIP		[] AL	
NAME	DIANA, NICHOLAS		2.1 TITLE			Change	☐ Addition
			2.2 NAME		Note that $x \in \mathcal{C}_{k}$		
STREET ADDRESS	29399 US 19N, STE 280		2.3 STREET	- 1			ľ
CITY-ST-ZIP	CLEARWATER FL	T 62.525	2. 4 CITY -	ST-ZIP			
TITLE	S SINDON OFFICE	□ DELETE	3.1 TITLE			L Change	Addition
NAME	JOHNSON, SHELLY		3.2 NAME				
STREET ADDRESS	29399 US 19 N, STE 280		3.3 STREET ADDRESS				ļ
CiTY-ST-ZIP			3.4. CITY	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE	1		Change	☐ Addition
NAME			4. 2 NAME	Ì			
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CiTY - 9	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition .
NAME			5.2 NAME				1
STREET ADDRESS			5.3 STREET	ADDRESS			i
CITY-ST-ZIP			5.4 CITY- 9	T- ZIP			Į
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME			Ÿ	-
STREET ADDRESS			6.3 STREET	ADDRESS			- 1
CITY-ST-ZIP			6.4 City - S	T- 71P			
III UI CAIBU I	un uns annual report or supplemental a	annual report is true and accu	the exemp	tion stated i	in Section 119.07(3)(i), Florida Statutes. I further cer ture shall have the same legal effect as if made und equired by Chapter 607, Florida Statutes; and that m	ier oath: th:	atlam an I