## **FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 02 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretar of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (3) H88355 GALAXY INSURANCE SERVICES, INC. Principal Place of Business Mailing Address 9889 UNIVERSITY DR.: STE-D-3000 UNIVERSITY DR.: OTE D CORAL SPRINGS FL 33065 **CORAL SPRINGS FL 33065** DO NOT WRITE IN THIS SPACE 1286 NW 113 3. Date Incorporated or Qualified Conal Spirmas, FL 33071 12/04/1985 2. Principal Place of Business 1386 113 2a. Mailing Address 1286 NW 113 4. FEI Number Applied For See alrave no 59-2260339 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Cocal 01010 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes \(\sigma\) No 33011 24 Personal Properly Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 3000 UNIVERSITY DRIVE, SUITE D Street Address 82 C/O GAND W. FIN. GRP. INC. 83 CORAL SPRINGS FL 33065 84 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, and accept the appointment as registered agent. I am familiar with, and accept the objugations of, Spection 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Winnick NAME WINNICK, SHERMAN 1.2 NAME 1286 8416 a STREET ADDRESS 1286 N.W. 113TH TERRACE 1.3 STREET ADDRESS CORAL SPRINGS FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE WINNICK, LUCILLE 2.2 NAME NAME 1286 N.W. 113TH TERRACE STREET ADDRESS 2.3 STREET ADDRESS CORAL SPRINGS FL CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4 2 NAME NAME

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 certify 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

54 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

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DELETE

DELETE

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

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CITY-ST-ZIP

TITL€ NAME

TITLE

NAME

narch 12 1998

☐ Addition

DEP. \$150.00

Change