

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

FILED

Feb 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H93983** (5)

1. Corporation Name

CAPITAL INSURANCE FACILITIES, INC.

Principal Place of Business

**2894 B REMINGTON GREEN LN.
TALLAHASSEE FL 32317
US**

Mailing Address

**PO BOX 15277
TALLAHASSEE FL 32317-5277
US**



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip **32308** 25 Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date Incorporated or Qualified

01/14/1986

3a. Date of Last Report

05/02/1996

4. FEI Number

59-2626570

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

**MANG, DOUGLAS A.
680 E. JEFFERSON ST.
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

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: type or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **FLECKENSTEIN, ROBERT O.**
STREET ADDRESS **ONE MADISON AVE**
CITY-ST-ZIP **NEW YORK NY 10010**

TITLE **C** ☐ DELETE
NAME **MARVIN, GUY III**
STREET ADDRESS **ONE INDEPENDENT WAY**
CITY-ST-ZIP **JACKSONVILLE FL 32278**

TITLE **D** ☒ DELETE
NAME **BESS, ROY F., JR**
STREET ADDRESS **611 COMMERCE ST STE 3109**
CITY-ST-ZIP **NASHVILLE TN 37203**

TITLE **P** ☐ DELETE
NAME **CARUTHERS, L.E.**
STREET ADDRESS **2894 B REMINGTON GREEN LN.**
CITY-ST-ZIP **TALLAHASSEE FL 32317**

TITLE **VP** ☐ DELETE
NAME **RABON, DAVID J**
STREET ADDRESS **2894 B REMINGTON GREEN LN.**
CITY-ST-ZIP **TALLAHASSEE FL 32317**

TITLE **TD** ☐ DELETE
NAME **MARTINEZ, ANDREW**
STREET ADDRESS **111 B S. MONROE ST.**
CITY-ST-ZIP **TALLAHASSEE FL 32301**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP **32308**

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP **32308**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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:

Signature Required
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

904-298-4436

Daytime Phone

0049329

CR2E034 (9/96)

Attachment "A"

Item 12: Additional Officers and Directors

1. Director
Michael R. Hightower
P. O. Box 1798
Jacksonville, Florida 32231
2. Director
Joseph J. Wallace, Jr.
1275 Milwaukee Road
Glenview, Illinois 60025
3. Secretary
Vonzell M. Powell
1430 Piedmont Drive East
Tallahassee, Florida 32312