COF	PROFIT RPORATION		6	IMENT OF STATE	May 08 1		
	Jal Report 1997		Secretar DIVISION OF C	y of State ORPORATIONS	Secreta	ry of S	tate
	MENT # J	34289	(5)				
LAKE C	ounty insuran	ice, inc			A KARAKAR OYAN AWAA AWAA AWAA AWAA AAAAA AAAAA AAAAA	alah din din din aran dian	a Ha Ha Hittan
nncipal Plac	e of Business		Mailing Address				
/O GRADY M 12 EAST 5TH OUNT DORA			C/O GRADY M. COOKSEY 342 EAST 5TH AVENUE MOUNT DORA FL 32757-50		3. Date Incorporated or Qualified	3a. Date of Last Re	
Principal P	lace of Business		28. Mailing Address	·	09/16/1986 4. FEI Number	05/01/1996	plied For
2552	25 HWY 46		26 P.O. Box 151		59-2721634	No	t Applicable
Suite, Apt	#, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A Fee Re	
City & State Sorrei	e nto, FL		City & State 28 Mt. Dora, FL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip	Count	ry	Zip	Country	8. This corporation has liability for	tangible tax under s.	
327 76	9. Name and Adde			30 US	Florida Statutes	Yes . No	
	OKSEY, GRADY M.,	JR.			7 HIII		
	E. 4TH AVENUE UNT DORA FL 3275	7		2552	dress (P.O. Box Number is Not Acceptabl 5 HWY 46	le)	
				83			
				03			
				84 City Sorre	nto	FL 85 Zip (ode 2776
1. Pursuant	to the provisions of Se	ctions 607.0502 a	nd 607.1508, Florida Statute Florida, Such change was a	84 City Sorre	nto proration submits this statement for the pration's board of directors. I hereby accep	FL 3	2776
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