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**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Apr 15 1997 8:00am

1997	PORT		DIVISION OF	ary of State CORPORAT	TIONS	Secreta	iy Oi	Su	
DOCUMENT # J39099 (3) FLORIDA INSURANCE MARKETING, INC.									
Principal Place of Busine	DEE	Mailin	na Address				HI OLIH BAMA BILI		
O BOX 1527			Mailing Address P O BOX 1527						
CAPE CORAL FL 33910			CAPE CORAL FL 33910-1527			·			
						3. Date Incorporated or Qualified 09/29/1986	3a. Date 04/18/		eport
l. Principal Place of Business 1		<b>├</b> ──¬	28. Mailing Address			4. FEI Number		<del></del>	plied For
Suite, Apt. #, etc.			Suite Apt #, etc.			59-2738491		\$8.75 A	t Applicable
2		27				5. Certificate of Status Desired		Fee Re	
City & State			ty & State	***************************************	- · · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing		\$5.00	May Be
3		28		<del></del>		Trust Fund Contribution		Added t	o Fees
7ip <b>4</b>	Country 25	29 Zij	р	Count 30	try	8. This corporation has liability for Florida Statutes	or intangible tax		199.032,
	ne and Address of C		ed Agent			10. Name and Address of New F			
BRUNO, LARF				8	1 Name				
312 N.W. 13T				8	2 Street Add	dress (P.O. Box Number is Not Accept	lable)	<del></del>	
CAPE CORAL	. FL 33909								
				8	3				
					J				
				8	4 City			B5 Zip (	Code
11 Pairsuant to the provi	usions of Sections 60	7 0502 and 607	1508 Florida Stati	1	"	rnoration submits this statement for the	FL	] '	
11. Pursuant to the provoffice or registered a	visions of Sections 60 agent, or both, in the	7.0502 and 607. State of Florida.	1508, Florida Statu Such change was	1	"	rporation submits this statement for the ation's board of directors. I hereby acc	FL	] '	
	nsions of Sections 60 agent, or both, in the with, and accept the	7.0502 and 607. State of Florida. obligations of, Sc	1508, Fiorida Statu Such change was ection 607.0505, F	1	"	rporation submits this statement for the ation's board of directors. I hereby acc	FL	] '	
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