FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State

| | 1996 | COUNTY. | DIVISION OF | | | | | | |
|--|---|--|---|--|--|--|--|--------------------------------|---|
| OCUN Corporation | MENT # J890 | 665 | (0) | | | | | | |
| | INSURANCE NETWOR | K OF FLORI | DA, INC. | | | | | | |
| | | | | | | | | | |
| incipal Place | of Business | Mailir | ng Address | | | | RDI DIII DIDII BR | FA BIBLI BOBI | 1816 016 116 |
| 2889 ELMWOOD DR. SMYRNA GA 30080 US | | SM | 2889 ELMWOOD DR. SMYRNA GA 30080 US | | | | · | | |
| | | | | | | 3. Date Incorporated or Qualified 08/28/1987 | | of Last R 2/14/19 | |
| Principal Pla | ace of Business | 2a. M | lailing Address | | | 4. FEI Number 59-2849661 | | | Applied For Not Applicable |
| Suite, Apt. # | 4, etc. | s | uite, Apt. #, etc. | | | 5. Certificate of Status Desired | | \$8.75 | Additional Required |
| City & State | ···································· | | rty & State | | | 6. Election Campaign Financing | | \$5.0 | May Be |
| Zip | Country | 28 | | Count | ry | Trust Fund Contribution 8. This corporation has liability for | | | d to Fees 199.032. |
| | 25 | 29 | | 30 | <u> </u> | Florida Statutes 🔲 Ye | s 🗆 No | | |
| | 9. Name and Address of | Current Register | ed Agent | | of Name | 10, Name and Address of New | Registered | Agent | |
| DODICO | N DIGHTADD I | | | | Name | | | | |
| | n, Richard L. Highway 17-92 | | | 6 | 2 Street Add | Iress (P.O. Box Number is Not Accepta | able) | | |
| | BERRY FL 32707 | | | 6 | 3 | | | | |
| | | | | 8 | 4 City | | FL | 85 Z | p Code |
| | | | | | 1 1 | | | | |
| or registere famil ar wit | o the provisions of Sections 60 ed agent, or both, in the State th, and accept the obligations of | of Florida. Such d | hance was authoriz | ed by the co | e-named corpo rporation's boa | oration submits this statement for the p ard of directors. I hereby accept the ap | ourpose of ch | anging its registered | registered offi d agent. I am |
| or registere famil ar wit SNATURE | ed agent, or both, in the State in the agent, or both, in the State in the obligations of security and accept the obligation of security of FICE. | of Florida. Such of of, Section 607.05 | hange was authoriz 05, Florida Statules Sahie: (NC DRS | red by the co one of the co | rporation's boa | ard of directors. I hereby accept the ap | purpose of chopointment as DATE FFICERS AND | DIRECTO | d agent. I am ORS IN 12 |
| or registere famil ar wit SNATURE | ed agent, or both, in the State th, and accept the obligations of Syndhol, by editor printed name of register of P | of Florida, Such of f, Section 607.05 red agent and title if appl | hange was authoriz 05, Florida Statutes | ored by the cost. OTE: Registered A. 1.1 TITL | rporation's boa | ard of directors. I hereby accept the ap | purpose of chopointment as DATE FFICERS AND | registered | d agent. I am |
| or registere famil ar wit NATURE | ed agent, or both, in the State in the agent, or both, in the State in the obligations of security and accept the obligation of security of FICE. | of Florida, Such of f, Section 607.05 red agent and title if appl | hange was authoriz 05, Florida Statules Sahie: (NC DRS | ored by the co | rporation's boa | ard of directors. I hereby accept the ap | purpose of chopointment as DATE FFICERS AND | DIRECTO | d agent. I am |
| or registere famil ar wit BNATURE - - - - - - - - - - - - - - - - - - - | ed agent, or both, in the State in the and accept the obligations of Squader, by ed or printed name of registe OFFICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA | of Florida, Such of f, Section 607.05 red agent and title if appl | hange was authoriz 05, Florida Statutes Cather (NC DRS | ed by the co b. TE Registered A 13. 1.1 Tift 1.2 NAM 1.3 STRI 1.4 City | gent signature require E E E E E E E F A D R S S S S S S S S S S S S | ard of directors. I hereby accept the ap | purpose of ch pointment as DATE FRICERS AND | DIRECTO | DRS IN 12 |
| or registore familiar wit SNATURE : : : : : : : : : : : : : : : : : : : | ed agent, or both, in the State in the and accept the obligations of Squader, by ed or printed name of registe OFFICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S | of Florida, Such of f, Section 607.05 red agent and title if appl | hange was authoriz 05, Florida Statules Sahie: (NC DRS | ord by the costs. TE Registered A. 13. 1.1 TITL 12 NAM 1.3 STRI 1.4 CITY 2.1 TITL | port signature require E IE EEI ADDRESS '-ST-ZIP E | ard of directors. I hereby accept the ap | purpose of ch pointment as DATE FRICERS AND | DIRECTO | d agent. I am ORS IN 12 Addition |
| or registore familiar wit RNATURE : :: :: :: :: :: :: :: :: :: :: :: :: | ed agent, or both, in the State of h, and accept the obligations of Squaden, bread or printed name of register OFFICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S TEFFT, DONALD E. | of Florida, Such of f, Section 607.05 red agent and title if appl | hange was authoriz 05, Florida Statutes Cather (NC DRS | DTE Registered A 13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM | pent signature require E IE EEF ADDRESS '-ST-ZIP .E | ard of directors. I hereby accept the ap | purpose of ch pointment as DATE FRICERS AND | DIRECTO | d agent. I am ORS IN 12 Addition |
| or registore familiar wit RNATURE : :: :: :: :: :: :: :: :: :: :: :: :: | ed agent, or both, in the State in the and accept the obligations of Squader, by ed or printed name of registe OFFICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S | of Florida, Such of f, Section 607.05 red agent and title if appl | hange was authoriz 05, Florida Statutes Cather (NC DRS | DTE Registered A. 13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI | port signature require E IE EEI ADDRESS '-ST-ZIP E | ard of directors. I hereby accept the ap | purpose of ch pointment as DATE FRICERS AND | DIRECTO | d agent. I am ORS IN 12 Addition |
| or registerer familiar with GNAT URE | ed agent, or both, in the State in, and accept the obligations of Survivin, function printed name of register of P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S TEFFT, DONALD E. 2889 ELMWOOD DR. SMYRNA GA V | of Florida, Such d of, Section 607.05 red agent and titled app RS AND DIRECTO | hange was authoriz 05, Florida Statutes Cather (NC DRS | DTE Registered A 13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.1 TITL 3.1 TITL 3.1 TITL 4.1 TITL 4.1 TITL 5.1 TITL 5.2 TITL 6.3 TITL 7.3 TITL 7.4 TITL 7.5 TITL 7 | gent signature require E E E E E E E F S S S S S S S S L D E E E E E E E E E E E E | ard of directors. I hereby accept the ap | purpose of ch pointment as DATE FFICERS AND | DIRECTO | ORS IN 12 Addition |
| or registere familiar wit SNATURE : : | ed agent, or both, in the State th, and accept the obligations of Survivin, igned or printed name of register of FICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S TEFFT, DONALD E. 2889 ELMWOOD DR. SMYRNA GA V JOHNSTON, MARIANN | of Florida, Such d of, Section 607.05 red agent and titled app RS AND DIRECTO | hange was authoriz 05, Florida Statutes Cathorization (NC DRS DELETE | DTE Registered A. 1 1 TITL 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM | port signature require E EEE ADDRESS (-ST-ZIP EEET ADDRESS (-ST-ZIP EEET ADDRESS (-ST-ZIP EEET ADDRESS (-ST-ZIP EEET ADDRESS | ard of directors. I hereby accept the ap | purpose of ch pointment as DATE FFICERS AND | D DIRECTO Change | ORS IN 12 Addition |
| or registere familiar wit GNAT UPRE STATE ADDRESS Y-S1-ZP JE ME HADDRESS Y-S1-ZP JE ME HADDRESS Y-S1-ZP JE ME HADDRESS JE ME HADDRESS HE HADDRESS | ed agent, or both, in the State th, and accept the obligations of Supulsia, igned or pristed name of register of FICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S TEFFT, DONALD E. 2889 ELMWOOD DR. SMYRNA GA V JOHNSTON, MARIANN 2889 ELMWOOD DR | of Florida, Such d of, Section 607.05 red agent and titled app RS AND DIRECTO | hange was authoriz 05, Florida Statutes Cathorization (NC DRS DELETE | DTE Registered A: 13. 1.1 TITE 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITE 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITE 3.2 NAM 3.3 STRI 4.3 STRI 4 | pent signature require E EEE ADDRESS (-ST-ZIP EEE ADDRESS (-ST-ZIP EEE ADDRESS (-ST-ZIP EEE ADDRESS | ard of directors. I hereby accept the ap | purpose of ch pointment as DATE FFICERS AND | D DIRECTO Change | ORS IN 12 Addition |
| or registere familiar wit SNAT URE : : | ed agent, or both, in the State th, and accept the obligations of Survivin, igned or printed name of register of FICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S TEFFT, DONALD E. 2889 ELMWOOD DR. SMYRNA GA V JOHNSTON, MARIANN | of Florida, Such d of, Section 607.05 red agent and titled app RS AND DIRECTO | hange was authoriz 05, Florida Statutes Cathorization (NC DRS DELETE | DTE Registered A: 13. 1.1 TITE 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITE 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITE 3.2 NAM 3.3 STRI 4.3 STRI 4 | pent signature require E EEE ADDRESS (-ST-ZIP EEET ADDRESS (-ST-ZIP EEET ADDRESS (-ST-ZIP EEET ADDRESS (-ST-ZIP EEET ADDRESS (-ST-ZIP | ard of directors. I hereby accept the ap | DATE FROERS AND | D DIRECTO Change | DRS IN 12 Addition Addition |
| or registore familiar with familiar with spanish are with spanish familiar with spanish familiar with spanish familiar f | ed agent, or both, in the State h, and accept the obligations of Surukin, brief or printed name of register OFFICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S TEFFT, DONALD E. 2889 ELMWOOD DR. SMYRNA GA V JOHNSTON, MARIANN 2889 ELMWOOD DR SMYRNA GA T DIAL, WILLIAM A. | of Florida, Such d of, Section 607.05 red agent and titled app RS AND DIRECTO | hange was authoriz 05, Florida Statutes Calle (NC DRS DELETE DELETE | DTE Registered A: 13. 1.1 TITE 12 NAM 1.3 STRI 1.4 CITY 2.1 TITE 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITE 3.2 NAM 3.3 STRI 3.4 CITY | pent signature require E EEE ADDRESS (-ST-ZIP EEE ADDRESS | ard of directors. I hereby accept the ap | DATE FROERS AND | D DIRECTO Change Change | DRS IN 12 Addition Addition |
| or registerer familiar with familiar with specific specif | ed agent, or both, in the State h, and accept the obligations of Supulsia, by ed or printed name of register OFFICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S TEFFT, DONALD E. 2889 ELMWOOD DR. SMYRNA GA V JOHNSTON, MARIANN 2889 ELMWOOD DR SMYRNA GA T DIAL, WILLIAM A. 2889 ELWOOD DRIVE | of Florida, Such d of, Section 607.05 red agent and titled app RS AND DIRECTO | hange was authoriz 05, Florida Statutes Calle (NC DRS DELETE DELETE | DTE Registered A. 13. 1.1 TITE 12 NAM 1.3 STRI 2.1 TITE 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITE 3.2 NAM 3.3 STR 3.4 CITY 4.1 TITE 4.2 NAM 4.3 STRI 4.2 NAM 4.3 STRI 4.3 S | pent signature require E E EEE ADDRESS (-ST-ZIP EEET ADDRESS | ard of directors. I hereby accept the ap | DATE FROERS AND | D DIRECTO Change Change | DRS IN 12 Addition Addition |
| or registerer familiar with familiar with spanish are with spanish familiar with spanish familiar with spanish familiar | ed agent, or both, in the State h, and accept the obligations of Surukin, brief or printed name of register OFFICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S TEFFT, DONALD E. 2889 ELMWOOD DR. SMYRNA GA V JOHNSTON, MARIANN 2889 ELMWOOD DR SMYRNA GA T DIAL, WILLIAM A. | of Florida, Such d of, Section 607.05 red agent and titled app RS AND DIRECTO | hange was authoriz 05, Florida Statutes Caller (NC) DRS DELETE DELETE DELETE | DTE Registered A: 13. 1 1 TITE 12 NAM 1.3 STRI 2 1 TITE 22 NAM 23 STRI 24 CITY 3 1 TITE 32 NAM 33 STR 4 CITY 4 1 TITE 42 NAM 43 STR 44 CITY 44 STR | pent signature require E E E EEET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP | ard of directors. I hereby accept the ap | purpose of chippointment as | D DIRECTO Change Change | DRS IN 12 Addition Addition Addition |
| or registerer familiar with familiar with special and special | ed agent, or both, in the State h, and accept the obligations of Supulsia, by ed or printed name of register OFFICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S TEFFT, DONALD E. 2889 ELMWOOD DR. SMYRNA GA V JOHNSTON, MARIANN 2889 ELMWOOD DR SMYRNA GA T DIAL, WILLIAM A. 2889 ELWOOD DRIVE | of Florida, Such d of, Section 607.05 red agent and titled app RS AND DIRECTO | hange was authoriz 05, Florida Statutes Calle (NC DRS DELETE DELETE | ed by the co. 13. 1.1 Titl 12 NAM 1.3 STRI 2 1 TITL 22 NAM 23 STRI 24 CITY 3 1 TITL 32 NAM 33 STR 4 CITY 4 1 TITL 42 NAM 4.3 STRI 42 NAM 4.3 STRI 44 CITY 5 1 TITL 5 1 TITL 5 1 TITL 5 1 TITL 5 TITL 5 TITL 5 TITL 1 TITL 5 TITL 5 TITL 1 TITL | pent signature require E E E EEI ADDRESS '-ST-ZIP E EET ADDRESS '-ST-ZIP E EET ADDRESS '-ST-ZIP E EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP EET ADDRESS (-ST-ZIP EET ADDRESS (-ST-ZIP EET ADDRESS | ard of directors. I hereby accept the ap | purpose of chippointment as | D DIRECTO Change Change | DRS IN 12 Addition Addition |
| or registerer familiar with familiar with special and special familiar with special familiar with special familiar famil | ed agent, or both, in the State h, and accept the obligations of Supulsia, by ed or printed name of register OFFICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S TEFFT, DONALD E. 2889 ELMWOOD DR. SMYRNA GA V JOHNSTON, MARIANN 2889 ELMWOOD DR SMYRNA GA T DIAL, WILLIAM A. 2889 ELWOOD DRIVE | of Florida, Such d of, Section 607.05 red agent and titled app RS AND DIRECTO | hange was authoriz 05, Florida Statutes Caller (NC) DRS DELETE DELETE DELETE | DIE Fogusterud A. 13. 1.1 TITL 12 NAM 1.3 STRI 22 NAM 23 STRI 24 CITY 31 TITL 32 NAM 33 STR 4 CITY 4 TITL 42 NAM 4.3 STR 44 CITY 51 TITL 52 NAM | pent signature require E E E EEI ADDRESS '-ST-ZIP E EET ADDRESS '-ST-ZIP E EET ADDRESS '-ST-ZIP E EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP EET ADDRESS (-ST-ZIP EET ADDRESS (-ST-ZIP EET ADDRESS | ard of directors. I hereby accept the ap | purpose of chippointment as | D DIRECTO Change Change | DRS IN 12 Addition Addition Addition |
| or registere familiar wit SNATURE | ed agent, or both, in the State h, and accept the obligations of Supulsia, by ed or printed name of register OFFICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S TEFFT, DONALD E. 2889 ELMWOOD DR. SMYRNA GA V JOHNSTON, MARIANN 2889 ELMWOOD DR SMYRNA GA T DIAL, WILLIAM A. 2889 ELWOOD DRIVE | of Florida, Such d of, Section 607.05 red agent and titled app RS AND DIRECTO | hange was authoriz 05, Florida Statutes Caller (NC) DRS DELETE DELETE DELETE | OTE Progression A. 13. 1.1 TITE 12 NAM 1.3 STRI 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITE 3.2 NAM 3.3 STRI 4.2 CITY 4.1 TITE 4.2 NAM 4.3 STRI 4.2 CITY 5.1 TITE 5.2 NAM 5.3 STRI 5.3 | pent signature require E E EEEE ADDRESS (-ST-ZIP EEEE ADRESS (-ST-ZIP EEEE ADRESS | ard of directors. I hereby accept the ap | purpose of chippointment as | D DIRECTO Change Change | DRS IN 12 Addition Addition Addition Addition |
| or registers familiar with CRNATURE FREE ADDRESS Y-ST-7/P ME | ed agent, or both, in the State h, and accept the obligations of Supulsia, by ed or printed name of register OFFICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S TEFFT, DONALD E. 2889 ELMWOOD DR. SMYRNA GA V JOHNSTON, MARIANN 2889 ELMWOOD DR SMYRNA GA T DIAL, WILLIAM A. 2889 ELWOOD DRIVE | of Florida, Such d of, Section 607.05 red agent and titled app RS AND DIRECTO | hange was authoriz 05, Florida Statutes Caller (NC) DRS DELETE DELETE DELETE | OTE Progression A. 13. 1.1 TITE 12 NAM 1.3 STRI 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITE 3.2 NAM 3.3 STRI 4.2 CITY 4.1 TITE 4.2 NAM 4.3 STRI 4.2 CITY 5.1 TITE 5.2 NAM 5.3 STRI 5.4 CITY 6.1 TITE 6.1 | pent signature require E IE IE IE IE IE IE IE IE IE | ard of directors. I hereby accept the ap | purpose of chippointment as | D DIRECTO Change Change | DRS IN 12 Addition Addition Addition |
| or registers familiar wit CRNATURE WE RELEADORESS Y-S1-7/P UF ME HEET ADDRESS Y-S1-7/P UF ME HEET ADDRESS IV-S1-7/P UF ME HEET ADDR | ed agent, or both, in the State h, and accept the obligations of Supulsia, by ed or printed name of register OFFICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S TEFFT, DONALD E. 2889 ELMWOOD DR. SMYRNA GA V JOHNSTON, MARIANN 2889 ELMWOOD DR SMYRNA GA T DIAL, WILLIAM A. 2889 ELWOOD DRIVE | of Florida, Such d of, Section 607.05 red agent and titled app RS AND DIRECTO | hange was authoriz 05, Florida Statutes Called Statutes CRS DELETE DELETE DELETE DELETE | OTE Progression A. 13. 1.1 TITE 12 NAM 1.3 STRI 22 NAM 23 STRI 24 CITY 31 TITE 32 NAM 33 STR 4 CITY 4 TITE 42 NAM 4.3 STR 44 CITY 51 TITE 52 NAM 53 STR 54 CITY 61 TITE 62 NAM | pent signature require E E EEE ADDRESS '-ST-ZIP EEE ADDRESS '-ST-ZIP EEE ADDRESS '-ST-ZIP EEE ADDRESS '-ST-ZIP EEE ADDRESS (-ST-ZIP EEE ADDRESS (- | ard of directors. I hereby accept the ap | purpose of chippointment as | D DIRECTO Change Change Change | d agent. I am |
| or registers familiar wit CRNAT-URE LE ME | ed agent, or both, in the State h, and accept the obligations of Supulsia, by ed or printed name of register OFFICE P DIAL, WILLIAM A., JR. 2889 ELMWOOD DR. SMYRNA GA S TEFFT, DONALD E. 2889 ELMWOOD DR. SMYRNA GA V JOHNSTON, MARIANN 2889 ELMWOOD DR SMYRNA GA T DIAL, WILLIAM A. 2889 ELWOOD DRIVE | of Florida, Such d of, Section 607.05 red agent and titled app RS AND DIRECTO | hange was authoriz 05, Florida Statutes Called Statutes CRS DELETE DELETE DELETE DELETE | DTE Registered A 13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STRI 5.4 CITY 6.1 TITL 6.2 NAM 6.3 STR | pent signature require E IE IE IE IE IE IE IE IE IE | ard of directors. I hereby accept the ap | purpose of chippointment as | D DIRECTO Change Change Change | DRS IN 12 Addition Addition Addition |

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

1/7/96 (770) 436-7575