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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P00561

(1)

PAUL R. SMITH, UNDERWRITING, INC.

FILED	
Feb 06 1997 8:00am	1
Secretary of State	

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Principal Piac	e of Business	Ма	ilirig Address		•		T HADITADE TLE BOTH DOINT MITTE DEFOR SIDE BIBLE BEBLE BERTE MINET DEBAT BEBLE
10451 GULD BI TREASURE ISL		ST.	BOX 67008 PETERSBURG BEACH	FL 3373	6-700	В	4.
US		US					3. Date Incorporated or Qualified 3a. Date of Last Report 01/12/1984 03/08/1996
	lace of Business	2a.	Mailing Address				4. FEI Number Applied For
21		26					58-1537536 Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional
22		27					Fee Required
City & Stat	e	⊢	City & State				6. Election Campaign Financing \$5.00 May Be
23	Country	28	7	1 0-			Trust Fund Contribution Added to Fees
Zip 24	Country	} <u>-</u>	Zıp	-	untry		8. This corporation has liability for intangible tax under s. 199.032,
24	25 25 9. Name and Address of Curr	ent Regist	ered Agent	30	1		Florida Statutes Yes No 10. Name and Address of New Registered Agent
CDE	GORY, WILLIAM P. P.A.	· · · · · · · · · · · · · · · · · · ·	or our rigorit		81	Name	IV, Italia ata Addises di Itas Itagistated Agent
	SWANN AVENUE						
1	PA FL 33606				82	Street Ac	ddress (P.O. Box Number is Not Acceptable)
IDM	TATE 00000				83		
					84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	602 and 60	7.1508, Florida Statut	tes, the a	above	-named ci	corporation submits this statement for the purpose of changing its registered
i orrice or r	registered agent, or both, in the Sta im familiar with, and accept the obl	ite of Floria	a. Such change was:	AUITONIZA	Ad by	the corno	oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered a	anent and title i	Leophoshie (NO)	F: Beaisten	ed Ane	nt signature re	equired when reinstating) DATE
12.	OFFICERS A			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TiTLE	PSD		☐ DELETE	1.1 1	TITLE		☐ Change ☐ Addition
NAME	SMITH, PAUL R.			1.2 6	NAME		
STREE! ADDRESS	10451 GULF BOULEVARD			1.3 \$	STREET	ADDRESS	
CITY-ST-7IP	TREASURE ISLAND FL			1,4 (CITY - S	T-ZIP	
TITLE	AS		☐ DELETE	2.1 1	IITL€		Change Addition
NAME	GREGORY WILLIAM P.			2.2 N	MAME		·
STHEET ADDRESS	715 SWANN AVENUE			2.3 9	STREET	ADDRESS	
CITY-ST-ZIP	TAMPA FL			2.4	CITY - S	T-ZIP	
¥fflE			☐ DELETE	3.1 7	TITLE		☐ Change ☐ Addition
NAME				3.2 N	NAME	-	
STREET ADDRESS				3.3 5	STREET	ADDRESS	
CITY-S1-ZIP					CITY-S	IT-ZIP	
THTLE			DELETE	4.1 T			Change Addition
NAME					NAME	ľ	r
STREET ADDRESS						ADDRESS	
CITY-ST-2IP	·····		T SCIETE		CITY-S	r-zip	
1IIL€			☐ DELETE	5.1 T			Change Addition
NAME					NAME		
STREET ADORESS						ADDRESS	
CITY-ST-ZIP			Deleve	_	ITY-S	I · ZIP	
TITLE			DELETE	6.1 T		İ	Change Addition
NAME				6.2 N			
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP				6.4 0	DITY-S	r-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 atlachment with an address.

SIGNATURE:

William P. Gregory Customare of Signing of