PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P10106

1. Corporation Name

ACCELERATION NATIONAL INSURANCE COMPANY

Principal Place of Business Mailing Address							((SECTION IN THE PERSON AND AND AND AND AND AND AND AND AND AN
			1840	,			
ACCELERATION NATIONAL INS 12603 SOUTHWEST FWY #315			ACCELERATION NATIONAL INS 12603 SOUTHWEST FWY. #315 STAFFORD TX 77477				DO NOT WRITE IN THIS SPACE
STAFFORD TX 77477 US			U\$				3. Date Incorporated or Qualifed 05/14/1986
2 Principal Pi	ace of Business	22	Mailing Address				4. FEI Number Applied For
	ace of Business	26				~	31-0989212 Not Applicable
21 Suite, Apt. i	# etc	201	Suite, Apt. #, etc.				\$8.75 Additional
22	, , 0.0.	27	2 , · . . . · · · · · · · · · · · · · · · · · · ·				5. Certificate of Status Desired Fee Required
City & State		- 21	City & State	-			6. Election Campaign Financing S5.00 May Be
23			28				Trust Fund Contribution Added to Fees
Zip				Country		8. This corporation owes the current year Intangible	
24	25	29	•	30	-		Personal Property Tax.
	9. Name and Address of Current		tered Agent		$\neg \Box$		10. Name and Address of New Registered Agent
		·····			81	Name	e
INSU	IRANCE COMMISSIONER				82	Cteant	et Address (P.O. Box Number is Not Acceptable)
CAPITOL BLDG. TALLAHASSEE FL 32301					82	Street	R Address (P.O. Box Number is Not Acceptable)
					83		
							lee 7: Code
					84	City	FI 85 Zip Code
100 Florid Child Child the hours and agreeating submits this statement for the gurrage of changing its registered							
office or re	agistared agent or both in the State o	t Florid	da. Such chande was a	uinor	izea ov	the corbo	poration's board of directors. I hereby accept the appointment as registered
agent. I ai	m familiar with, and accept the obligati	ons of	, Section 607.0505, Fio	rida S	Statutes	•	
SIGNATURE Signature, typed or printed name of registered agent and trile if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
12.	OFFICERS ANI				13.	it digitata a	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CD	<i>- - - - - - - - - -</i>		_	1.1 TITLE		CD ☐ Change 🔀 Addition
NAME	FRIEDBERG, THOMAS H		_	Ι,	1.2 NAME		Douglas J. Coats
_ 1	-12603 SOUTHWEST FREEWAY	STE :	315			ADDRESS	12603 Southwest Freeway STE 315
STREET ADDRESS	STAFFORD TX 77477	VIL (J15		1.4 CITY-S		Stafford Tx 77477
CITY-ST-ZIP TITLE	VDS		□ DELETE		2.1 TITLE	1-ZIF	Change Addition
	ALEXANDER, NICHOLAS Z.				2.2 NAME		
NAME						. ADDOESS	
STREET ADDRESS	7970 GREENSIDE LANE			- 1		ADDRESS	8
CITY-ST-ZIP	COLUMBUS OH		☐ DELETE	_	2. 4 CITY-5	i-ZIP	Change Addition
TITLE	PD		□ DELETE		3.1 TITLE		
NAME	COATS, DOUGLAS J	^T"	0.15		3.2 NAME		
STREET ADDRESS	12603 SOUTHWEST FREEWAY,	SIE	315			TADDRESS	
CITY-ST-ZIP	STAFFORD TX 77477				3.4. CITY-9	T-ZIP	☐ Change ☐ Addition
TITLE	VD		☐ DELETE		4.1 TITLE		☐ Cusude ☐ Monton
NAME	MOORE, CYNTHIA A		-		4. 2 NAME		
STREET ADDRESS	12603 SOUTHWEST FREEWAY	STE :	315			ADDRESS	SS
CITY-ST-ZIP	STAFFORD TX 77477				4.4 CITY-S	T-ZIP	
TITLE	V		💢 DELETE		5.1 TITLE		V Change X Addition
NAME	MACDONOUGH, STEPHEN P				5.2 NAME		Robert Estlund
STREET ADDRESS	12603 SOUTHWEST FREEWAY	, STE	315	1	5.3 STREE	T ADDRESS	12603 Southwest Freeway, STE 315 Stafford, Tx 77477
CITY-ST-ZIP	STAFFORD TX 77477				5.4 CITY-S	T- ZIP	
TITLE			☐ DELETE		6.1 TITLE		☐ Change ☐ Addition
NAME				- [6.2 NAME		
							1

CITY-ST-ZIP 14. 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, with all other like empowered.

STREET ADDRESS

Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90088 041 ***150.00