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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

## **FILED** May 04 1998 8:00am Secretary of State

BATON ROUGE LA 70816-4368  SUB- NOTO WHITE IN THIS SPACE  2. Principal Place of Business  2. Naming Addross  2. Principal Place of Business  2. Substance   Substance   Property   Principal Place of Business   Principal Place of Business	AUDUBON INSURANCE COMPANY  Principal Place of Business Mailing Address  4150 SOUTH SHERWOOD FOREST BLVD.  4150 SOUTH SHERWOOD FOREST BLVD.						
2. Principal Place of Business					DO AIGT MIDITE IN TO	IIO ODA OF	
2. Principal Place of Business						IIS SPACE	
Sulfo, Apt. 4, etc.							
Suite, Apt 4, etc.  27  City 5 State  City 5 State  City 5 State  City 6 State  City 7 State  Recreation controlled City 6 Controlled City 6 C	L '	lace of Business	<b>⊢</b> , *			<del></del>	
City & State    27		# etc					
City & State  28   Country   29   Country   29   Country   20   Country   20   S. This corporation owns or has paid the current year intangible   Parsonal Property Tax due June 30.   Year   The Captrol Bull DNG   Year   The Captrol Bull DNG   TALLAHASSEE FL 32301   S2   Street Address (P.O. Box Number is Not Acceptable)  11. Pursuent to the provisions of Sections 607,0502 and 607 1508. Florida Sintues, the above-named corporation submits this statement for the purpose of changing its registered officer or repaired agent. In the Interest with a member with, and eacept the obligation of 3, Scoric Property Section (P.O. Box Number is Not Acceptable)  11. Pursuent to the provisions of Sections 607,0502 and 607 1508. Florida Sintues, the above-named corporation submits this statement for the purpose of changing its registered officer or repaired agent. In the Interest with an entire with, and eacept the obligation of 3, Scoric off Sections Statutes.  12. OFFICE RS AND DIRECTORS  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 INTILE  14. AUGNOST IN 12 INTILE  15. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 INTILE  15. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 INTILE  16. STREET ADDRESS  16. This corporation was on has paid the current year intered by the appointment as registered dependence of the obligation of the purpose of changing its registered dependence of the obligation of the corporations submits this statement for the purpose of changing its registered dependence of the obligation of the corporation submits this statement for the purpose of changing its registered dependence of the obligation of the corporation submits this statement for the purpose of changing its registered dependence of the obligation of the corporation submits this statement for the purpose of changing its registered dependence of the object of the ob	22	w, 010.	· · · · ·		5. Certificate of Status Desired		
Zip Country Zip Country Zip Country Bell of Country Significant Co		θ			1		
NSURANCE COMMISSIONER THE CAPITOL BUILDING TALLAHASSEE FL 32301  84 City  85 Street Address (P.O. Box Number is Not Acceptable)  86 Tallahassee FL 32301  87 City  88 City  88 City  89	Zip	Country	├─ ` <b>├</b> ─-	_	8. This corporation owes or has paid the		
INSURANCE COMMISSIONER THE CAPITOL BUILDING TALLAHASSEE FL 2301  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  85 City FL 86 Zip Code  86 City FL 86 Zip Code  87 City FL 86 Zip Code  88 City FL 86 Zip Code  89 City St. 2P  89 City St. 2P  80 City	24			0			
THE CAPITOL BUILDING TALLAHASSEE FL 32301  82 Street Address (P.O. Box Number is Not Acceptable)  83 84 City FL 86 Zip Code  11. Pursuant to the provisions of Sections 607 6502 and 607 1508. Ebrids Statutes the above-named corporation submits this statement for the purpose of changing its registered eigent. In both in the Statute of Florids. Such change valuabilities that the purpose of changing its registered eigent of the p					15. Johns Blift Workless of Mass Leafister	se signii	
TALLAHASSEE FL 32301    Ball				82 Strapt Adds	ass (P.O. Box Number is Not Accentable)		
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Fibrida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and familiar with, and accept the obligations of, Section 607 0505. Fibrida Statutes.  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  I TITLE  OFFICERS AND DIRECTORS  12. NAME  12. NAME  12. NAME  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  I TITLE  VID. SERREWOOD FOREST  13. SIRET ADDRESS  CITY-ST-2P  STREET ADDRESS  CITY-ST-2P  SIRET ADDRESS  CITY-ST-2P  SIRET ADDRESS  SIRET	TAI	LLAHASSEE FL 32301			eas (1.0. box realmost is real receptable)		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statuties, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered gent and frenial with, and accept the obligations of Section 607.0505, Florida Statuties.  SIGNATURE  Signature typed or pertect name of registered florid such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered gent and feer application of the provision of				83			
191. Pursuent to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered appoint a manufacture of the composition of registered appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered statutes.    SIGNATURE				84 City	E	85 Zip Code	
SIGNATURE    12.	11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-named corp			
SIGNATURE    12.	office or registered agent, or both, in the State of Floridal Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
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PATOM POLICE LA			_				
CITY-ST-ZIP BATON ROUGE LA	STREET ADDRESS			6.3 STREET ADDRESS			
14. Thereby 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	CITY - ST - ZIP			6.4 CITY-ST-ZIP			

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 early that I am an officer or director of the corporation or the receiver or treated 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.

SIGNATURE:

4/21/98

(504) 293-5900 Ext.