

FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 06 1996 8:00 am  
Secretary of State

DOCUMENT # P92000005276 (0)

1. Corporation Name

FLORIDA COMMERCIAL INSURANCE AGENCY, INC.



Principal Place of Business

22 STATE RD 00 WEST  
LAKE WALES FL 33853  
US

Mailing Address

P O BOX 2368  
LAKE WALES FL 33859-2368

3. Date Incorporated or Qualified  
11/16/1992

3a. Date of Last Report  
04/24/1995

2. Principal Place of Business

21 244 E. Park Avenue

Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

4. FEI Number

59-3151930

Applied For  
Not Applicable

22 City & State

23 Lake Wales, FL

27 City & State

28 Lake Wales, FL

24 Zip

33853

25 Country

US

29 Zip

33859

30 Country

US

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MICHAEL R BUTLER  
244 EAST PARK AVENUE  
LAKE WALES FL 33853

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant 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 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE

NAME ~~RUMFELT, THOMAS B~~

STREET ADDRESS ~~244 E PARK AVE~~

CITY- ST- ZIP ~~LAKE WALES FL~~

TITLE ☐ DELETE

NAME BUTLER, MICHAEL R

STREET ADDRESS 244 E PARK AVE

CITY- ST- ZIP LAKE WALES FL

TITLE ☐ DELETE

NAME GRIMES, KEVIN

STREET ADDRESS 244 E PARK AVENUE

CITY- ST- ZIP LAKE WALES FL

TITLE ☒ DELETE

NAME ~~SOWINSKI, MICHAEL B~~

STREET ADDRESS ~~244 E PARK AVE~~

CITY- ST- ZIP ~~LAKE WALES FL~~

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

☐ Change ☐ Addition

Director ☐ Change ☒ Addition

President /Director ☒ Change ☐ Addition

Sr. Vice Pres./Director ☐ Change ☒ Addition

Nesbitt, Rowena J. ☐ Change ☒ Addition

244 E. Park Avenue ☐ Change ☒ Addition

Lake Wales, FL 33853 ☐ Change ☒ Addition

Sr. Vice Pres/Director ☐ Change ☒ Addition

Brown, Phillip ☐ Change ☒ Addition

9 Thomas Street ☐ Change ☒ Addition

Thomasville, NC 27360 ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Kevin R. Grimes  
Thomas B. Rumfelt, President 02/01/96 (941) 676-2852

CR2E034 (12/95)