

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

AMENDED REPORT

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 92000010781

1. Corporation Name

Senior Citizens Insurance Services, Inc.

Principal Place of Business

Mailing Address

115 8th St. BB
Bradenton Beach, FL
34217

P.O. Box 308
Bradenton Beach, FL
34217

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/09/92

4. FEI Number

59-3163503

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 1401 Manatee Ave. W.

Suite, Apt. #, etc.

22 City & State

23 Bradenton, FL

Zip Country

24 34205

2a. Mailing Address

26 P.O. Box 471

Suite, Apt. #, etc.

27 City & State

28 Bradenton, FL

Zip Country

29 34206

30

9. Name and Address of Current Registered Agent

Ray Henwood
115 8th St. BB
Bradenton Beach, FL 34217

10. Name and Address of New Registered Agent

81 Name Ray Henwood

82 Street Address (P.O. Box Number is Not Acceptable)
1401 Manatee Ave. W.

83

84 City Bradenton

FL

85 Zip Code 34205

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

9/7/99

12. OFFICERS AND DIRECTORS

V
NAME Marilyn Henwood
STREET ADDRESS 115 8th St. BB
CITY-ST-ZIP Bradenton Beach, FL 34217

NAME
STREET ADDRESS
CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP

NAME
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CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V
1.2 NAME Jean Henwood
1.3 STREET ADDRESS 1401 Manatee Ave. W.
1.4 CITY-ST-ZIP Bradenton, FL 34205

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

14. I 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/7/99

CR2E034 (11/98)