FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

P93000002473 (5)

ALBERT INSURANCE AGENCY, INC.

Suite, Apt. #, etc. 22 City & State City &										
SADE LIAKE ROAD PAIL HARBOR R J 3885	Principal Place of Business Mailing Address						T I DEDITER I NIU IDIOE NIN BURN DENK	681 11 68 11 48 111	, 11 3 11 01011	INDAE IIII FAES
Pricing Page of Business 2a. Making Address 2a. Making Address 3a. Making Address 3	3430 E. LAKE	ROAD	3430 E. LAKE ROAD	3430 E. LAKE ROAD			Date Incorporated or Qualified	3a. Date o	of Last Re	eport
Section Applies Section Ap							1		*	
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City & State Ci	21									
28	Suite, Apt. #	, etc.	27	27			Fee Required			
25	City & State		⊢ •	28			Trust Fund Contribution Added to Fees			
9. Name and Address of Current Registered Agent ALBERT, JAMES 3430 E. LAKE ROAD PAL HARBOR FL 34685 Ba City FL Bs Zor Code Th. Pursuant to the previsions of Sections 607 (0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered difference or registered agent. or both in the State of Foods. Submit designed with the State of Foods. Submit designed by the corporation's board of directors. Hereby accept the appointment as registered difference or registered agent. The purpose of changing was authorized by the corporation's board of directors. Hereby accept the appointment as registered difference or registered agent. The purpose of changing its registered difference or registered agent. The purpose of changing its registered difference or registered agent. The purpose of changing its registered difference or registered agent. The purpose of changing its registered difference or registered agent. The purpose of changing its registered difference or registered agent. The purpose of changing its registered difference or registered agent. The purpose of changing its registered difference or registered agent. The purpose of changing its registered difference or registered agent. The purpose of changing its registered difference or registered agent. The purpose of changing its registered difference or registered agent. The purpose of changing its registered difference or registered agent. The purpose of changing its registered difference or registered agent. The purpose of changing its registered difference or registered agent. The purpose of changing its registered difference or registered agent. The purpose of changing its reg				ıntry	•			199.032,		
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B3 B4 City FL B5 Zo Code	AI DEDT	IAMES				i		1-3		
PAL HARBOR FL 34685 B3					82	Street Addre	t Address (P.U. Box Number is Not Acceptable)			•
Pure stant to the provisions of Sections 607.0502 and 607.1506, 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 office for floridation and the florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office affailable with a displaced and because the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with a displaced and because the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with a displaced and sets #ajumides and purpose of the proportion and proportion are registered agent. I am familiar with a displaced and sets #ajumides and proportion and proportion are registered office. Interview PSTD					83					
11. Passants on the provisions of Sections 607 6002 and 607 1503. Frontis Statutes, the above normed ecoporation is branches for the purpose of changing its registered office or registered agent or both, in the Statute of Forcial, Suber longing was a unbroad by the conformation's board of directors. Thereby accept the appointment as registered agent. I am mill will, and accept the obligations of, Section 607,0500, Florida Statutes. SIGNATURE SPECIAL DESTRUCTION OF THE STATE OF PROVIDED TO STATE OF THE STA	V/12:00				84	City		FI	85 Zr	o Code
12	or registore	ed agent, or both, in the State of	Florida, Such change was author	orized by the i	Dve-r corp	named corpora poration's board	ation submits this statement for the pur d of directors. I hereby accept the app	pose of char pintment as r	iging its re egistered	egistered office agent. I am
12	SIGNATURE _	Street in three or printed pages of registered	Lancest and title if annicable	(NOTE: Beoistere	i Amer	nt signature required	when reinstatinol	DATE		and address times were switched to the same
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4. 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). Fiorida 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:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

3-1-96

Daytime Phone #

72E034 (12/95)