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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000054612

PINE FOREST UNDERWRITERS, INC.									
							AH BIHIL BIBI		(818 118 158
Principal Plac	e of Business	Mailing Address					ti Briti Bibli		1010 (IE: 10E)
201 N. JEFFERSON STREET 201 N. JEFFERSON STREET									
PERRY FL 32347 PERRY FL 32347							. •		
US US						DO NOT WRITE IN TH	S SPACE	<u>:</u>	<u> </u>
						3. Date Incorporated or Qualifed			
<u> </u>		T				07/28/1993			
⊢ ⊸ '	flace of Business	2a. Mailing Address				4. FEI Number	L		lied For
21 Cuita Ant	# -4-	26				59-3196117		-	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired			dditional
City & Stat		City & State			•	·		e Req	·
						6. Election Campaign Financing			May Be
7in				try		Trust Fund Contribution		ded to	rees
24	25 29 30			,		8. This corporation owes the current year Intangible Personal Property Tax.			
24	9. Name and Address of Current		30			10. Name and Address of New Registere			
				81	Name	,			
LUSH, CARLTON						***			
201 N. JEFFERSON STREET				B2	Street Addres	ss (P.O. Box Number is Not Acceptable)			•
PERRY FL 32347			8	B3			3.50-2.73		Title at
			L					to,	8- #1.41.
			1	84	City	· · · · · · · · · · · · · · · · · · ·	85	Zip Co	ode
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 r	egistered agent, or both, in the State of	Florida, Such change was au	thorized b	by t	he corporation	n's board of directors. I hereby accept the app	ointment a	as regi	stered
	m rammar with and accept the congain	ons of, Section 607.0303, 1 lon	da Statut	Ç3.			4		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered A	gent	signature required v	when reinstating) DATE			—
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTOR	S IN 12
TITLE	P	□ DELETE	1.1 TITLE	E	ĺ		☐ Cha	nge	☐ Addition
NAME	LUSH, CARLTON		1.2 NAM	E					
STREET ADDRESS	201 N JEFFERSON ST		1.3 STRE	EET/	ADDRESS				,
CITY-ST-ZIP	PERRY FL		1.4 CITY	-ST-	-ZIP				
LIUTE		☐ DELETE	2.1 TITLE	E		,	Cha	nge	Addition
NAME			2.2 NAM	E	į				
STREET ADDRESS			2.3 STRE	EET A	ADDRESS		•		
CITY-ST-ZIP			2. 4 CITY	/-ST	:-ZIP				
TITLE		☐ DELETE	3.1 TITLE	E			☐ Chai	nge	☐ Addition
NAME			3.2 NAMI	E					
STREET ADDRESS			3.3 STRE	EETA	ADDRESS	•,			
CITY-ST-ZIP			3.4. CITY	<u></u> ST-	-ZIP		• • • ;		
TITLE		☐ DELETE	4.1 TITLE	E			☐ Cha	nge	. Addition
NAME			4. 2 NAM	Œ					
STREET ADDRESS			4.3 STRE	EETA	ADDRESS				
CITY-ST-ZIP			4.4 CITY	-ST-	ZIP				
TITLE		☐ DELETE	5.1 TITLE	=			☐ Chai	nge	Addition
NAME			5.2 NAME	E					
STREET ADDRESS			5.3 STRE	EETA	ADDRESS				
CITY-ST-ZIP			5.4 CITY-	-ST-	ZIP	·			
TITLE		☐ DELETE	6.1 TITLE	:			Char	nge	Addition
NAME			6.2 NAME	E			1,5		
STREET ADDRESS			635705	ET A	VDDBEGG .	•			· · · · · · · · · · · · · · · · · · ·

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.

6.4 CITY-ST-ZIP

SIGNATURE:

Carlton R.Lush

FILED

Feb 11, 1999 8:00am

Secretary of State

02-11-1999 90053 011 ***150.00