FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 MAY 16 AM 9:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000067258 (2)**

1. Entity Name

VICTORY INSURANCE OF LAKE WALES, INC.

Principal Place of Business	Mailing Address
318 S. SCENIC WAY SUITE 101 LAKE WALES FL 33853	318 S. SCENIC WAY SUITE 101 LAKE WALES FL 33853

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
09/28/1993	05/01/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. # or Bldg.	Suite, Apt. # or Bldg.
22	27
City & State	City & State
23	28
ZIP / County	ZIP / Country
24 / 25	29 / 30

4. FEI Number: **59-3202254** ☐ Applied For ☐ Not Applicable

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 initially or subsequently elected to be treated as a "public utility" under Florida Statutes. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
O'STEEN, LEWIS D 318 S. SCENIC HWY SUITE 101 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 Section 607.0502 and 607.0505 Florida Statutes, the above named corporation submits the 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

12. OFFICER AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (Y, T)
Title	PD	☐ Change ☐ Addition
Name	O'STEEN, LEWIS D	
Street Address	318 S. SCENIC WAY #101	
City-St-Zip	LAKE WALES FL 33853	
Title	SD	☐ Change ☐ Addition
Name	FISHER, GEORGE E	
Street Address	305 W. MEMORIAL BLVD.	
City-St-Zip	LAKELAND FL 33801	
Title	TD	☐ Change ☐ Addition
Name	FISHER, MERRILLEE K	
Street Address	106 W. CENTRAL AVE.	
City-St-Zip	WINTER HAVEN FL 33880	
Title		☐ Change ☐ Addition
Name		
Street Address		
City-St-Zip		
Title		☐ Change ☐ Addition
Name		
Street Address		
City-St-Zip		
Title		☐ Change ☐ Addition
Name		
Street Address		
City-St-Zip		

14. I hereby certify that the information supplied with this filing is accurate, and that this authorization for the corporation to file for the entity named in item 1 is made in accordance with the applicable provisions of Florida Statutes. I further certify that the information indicated on this report or supplemental 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 with an address, with an asterisk, or on an attachment with an address.

SIGNATURE: Lewis D. O'Steen **5/1/95** **813-678-0668**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0317310 CP