PROFIT CORPORATION ANNUAL REPORT



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

1996	
DOCUMENT	#

1. Corporation Name

P95000031487 (8)

PREMIER TRANSPORTATION UNDERWRITERS, INC.

Mailing Address Principal Place of Business 2232 HAMLET DRIVE 2232 HAMLET DRIVE MELBOURNE FL 32934 MELBOURNE FL 32934 3. Date Incorporated or Qualified 3a. Date of Last Report 04/17/1995 4. FEI Number Applied For Mailing Address 2. Principal Place of Business 2a. Not Applicable 59-3310494 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s 199.032, Country Zip Country Yes No Florida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PRICE, LYNN R Street Address (P.O. Box Number is Not Acceptable) **B2** 1901 HIGHWAY A1A, SUITE 2 83 INDIAN HARBOUR BEACH FL 32937 Zip Code 85 84 City 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 (NOTE: Registered Agent signature required when reinstalling) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE Change Addition 1. 1 TITLE TIFLE WILLIAMS, EDWARD R JR 12 NAME NAME 2232 HAMLET DRIVE 1.3 STREET ADDRESS STREET ADDRESS **MELBOURNE FL 32934** 1.4 CHTY - ST - ZIP CITY-ST-ZIP Change ☐ Addition DELETE 2.1 TITLE TITLE ZINONE, GERARD M 22 NAME NAME 961 SOMERSET LANE 23 STREET ADDRESS STREET ADDRESS **MELBOURNE FL 32940** 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE 3. 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - ZIP DITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP CITY - ST - ZIP Addition ☐ Change DELETE 5. 1 TITLE TITLE 5.2 NAME NAMÉ

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.

5.3 STREET ADDRESS

63 STREET ADDRESS

64 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE 62 NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DELETE

CR2E034 (12/95)

Addition

Change