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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000041763 (0)

TRUCK INSURANCE OF ORLANDO, INC.

## May 11 1998 8:00am Secretary of State

# JOHN A. TAGGART 2455 \$. ORANGE BLOSSOM TRAIL APOPKA FL 32703  2. Principal Place of Business 2. Mailing Address 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 2. City & State 2. City & State 3. Date Incorporated or Qualified 05/26/1995  4. FEI Number 59-33 19936	Bringing! Blog	and thuring a	No. Co. Add.				
Section   Sect	2455 S. ORANGE BLOSSOM TRAIL		2455 S. ORANGE BLOSSOM TRAIL		DO NOT WRITE IN TI	HIS SPACE	
Sulfe, Apr. #, etc.  City & Stato  Sulfe, Apr. #, etc.  City & Stato  City & Stato  City & Stato  Sulfe, Apr. #, etc.  City & Stato  City & Stato  Sulfe, Apr. #, etc.  Su					<b>,</b>		
Sulfer, April **, etc.   Sulfer, April **, etc		Place of Business	2a. Mailing Address			Applied For	
Sulfer, April **, etc.   Sulfer, April **, etc	21		26		59-3319936	Not Applicable	
City & State    City & State   City & City & State   City & State	Suite, Apt.	#, etc.	<u> </u>		1		
27) Country Zip Country Zip Country Sip B. Trust Fund Contribution	City & State	ie .			6. Election Campaign Financing	\$5.00 May Be	
Zip   Country   Zip   Country   Zip   Country   Person corporation owns or has paid the current year lapsofible   Person corporation owns or has paid the current year lapsofible   Person property Tax due June 30.   Yes   No	23		28				
B. Name and Address of Current Registered Agent  LUBRANO, ANDREW J 101 EAST KENNEDY BLVD. SUITE 3700, BARNETT PLAZA TAMPA FL 33802  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Floridal 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 Floridal 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 Floridal 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 Floridal Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Floridal Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Floridal Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Floridal Statutes.  SIGNATURE  OFFICERS AND DIRECTORS IN 12  11. This  P	Z <sub>I</sub> p	<del>-</del>	<u> </u>				
LUBRANO, ANDREW J 101 EAST KENNEDY BLVD. SUITE 3700, BATNETT PLAZA TAMPA FL 33802  11. Pursuant to the provisions of Sections 607 0502 and 607 1506, Florida Statutes, the above-named corporation submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Horida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signant, and the displacation of Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  To OFFICER S AND DIRECTORS  12. OFFICER S AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICER S AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  13. SIRECT ADDRESS  CITY-ST-2P  14. CITY-ST-2P  14. CITY-ST-2P  14. CITY-ST-2P  14. CITY-ST-2P  15. THE  15.				130			
SUTE 3700, BARNET PLAZA TAMPA FL 33602  82   Street Address (P.O. Box Number is Not Acceptable)  83    84   City   FL   85   Zip Code  11. Pursuant to the provisions of Socious 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 Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered of the appointment as registered agent and the displaced of the provisions of Socious 87.050, Florida Statutes.  83   STORT ADDRESS   1.0   STORT							
SUFE 3700, BARNETT PLAZA TAMPA FL 33802  83  84  City  FL  85  City  FL  FL  85  City  FL  Ba  City				20 0			
TAMPA FL 33802    Sa				82 Street Add	ress (P.O. Box Number is Not Acceptable)		
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, and accept the obligations of Section 607.0505, Florida Statutes.  SIGNATURE				83			
11. Pursuant to the provisions of Socions 607,0502 and 607 1506, Florida Statutes, the above-named corporations submits this atterment 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 or registered agent, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE    Signature				84 City		85 Zip Code	
12	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						
12.	SIGNATURE						
TITLE	<del></del>						
NAME   STREET ADDRESS   2455 S ORANGE BLOSSOM TR   13 STREET ADDRESS   14 CTY-ST-2P   APOPKA FL 32703   14 CTY-ST-2P		P			ADDITIONS OF TARGET TO OFFICE NO.		
STREET ADDRESS   2455 S ORANGE BLOSSOM TR	NAME	TAGGART, JOHN A		1.2 NAME			
APOPKA FL 32703	STREET ADDRESS		TR	1.3 STREET ADDRESS			
DELETE   DELETE   2.1 TITLE   Change   Addition   Add	CITY-ST-ZIP	APOPKA FL 32703					
STREET ADDRESS   2.3 STREET ADDRESS   2.4 CITY-ST-ZIP	TITLE		☐ DELETE			☐ Change ☐ Addition	
CITY-ST-ZIP	NAME			2.2 NAME			
TITLE	STREET ADDRESS			2.3 STREET ADDRESS			
NAME	CITY-ST-ZIP			2.4 CITY-ST-ZIP			
STREET ADDRESS   3.3 STREET ADDRESS   3.4 .CITY - ST - ZIP	TITLE		☐ DELETE	3.1 TITLE		Change Addition	
Street address   Stre	NAME			32 NAME			
TITLE				3.3 STREET ADDRESS			
A 2 NAME		1844 - 1854 - 1854 - 1854 - 1854		<del></del>			
STREET ADDRESS			□ DELETE			☐ Change ☐ Addition	
CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME         STREET ADDRESS         CITY-ST-ZIP         CITY-ST-ZIP         Change         Addition           NAME         DELETÉ         6.1 TITLE         Change         Addition           NAME         62 NAME         Change         Addition							
TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME         STREET ADDRESS         CITY-ST-ZIP         5.3 STREET ADDRESS         CITY-ST-ZIP         Change         Addition           NAME         DELETÉ         6.1 TITLE         Change         Addition           NAME         62 NAME         Addition         Addition							
NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS           CITY-ST-ZIP         5.4 CITY-ST-ZIP           TITLE         DELETÉ         6.1 TITLE         Change         Addilion           NAME         62 NAME			T DELETE			Change Addition	
STREET ADDRESS         5.3 STREET ADDRESS           CITY-ST-ZIP         5.4 CITY-ST-ZIP           TITLE         DELETÉ         6.1 TITLE         Change         Addilion           NAME         62 NAME			☐ Netter			Change L Addition	
CITY-ST-2IP         5.4 CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         62 NAME         Addition         Addition							
TITLE         DELETÉ         6.1 TITLE         Change         Addition           NAME         62 NAME	1						
NAME 62 NAME		<del>-</del>	Deletë			Change Addition	
	1			•		CHANGE CHANGING	
Source debution 1 ■ D22 LKFF (All MENN 1	Į.						
CITY-SI-7/P							

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.

John A. Taggart 4/30/98 407-295-3846