

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

FILED
Apr 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000044330 (5)**

1. Corporation Name

MACDUFF PINELLAS UNDERWRITERS, INC.

Principal Place of Business

Mailing Address

**401 E JACKSON ST
1700
TAMPA FL 33602
US**

**401 E JACKSON ST
1700
TAMPA FL 33602
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/08/1995

4. FEI Number

59-3328654

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GRAMMIG, LAUREL L.
401 E JACKSON ST
STE. 1700
TAMPA FL 33602**

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 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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		
TITLE	D/P	<input type="checkbox"/> DELETE
NAME	RAMBO, BILL	
STREET ADDRESS	220 S RIDGEWOOD AVE	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	
TITLE	D/T	<input type="checkbox"/> DELETE
NAME	HENDERSON, JIM	
STREET ADDRESS	220 S RIDGEWOOD AVE	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	
TITLE	C/D	<input type="checkbox"/> DELETE
NAME	BROWN, HYATT J.	
STREET ADDRESS	220 S RIDGEWOOD AVE	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	
TITLE	S	<input type="checkbox"/> DELETE
NAME	GRAMMIG, LAUREL L.	
STREET ADDRESS	401 E. JACKSON ST., STE. 1700	
CITY-ST-ZIP	TAMPA FL	
TITLE	SVP	<input type="checkbox"/> DELETE
NAME	ROEHRIG, DANA	
STREET ADDRESS	9800 4TH STREET NO., SUITE 303	
CITY-ST-ZIP	ST. PETERSBURG FL 33742	
TITLE	SVP	<input type="checkbox"/> DELETE
NAME	EPLEY, GLEN	
STREET ADDRESS	9800 4TH STREET NO., SUITE 303	
CITY-ST-ZIP	ST. PETERSBURG FL 33742	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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.

SIGNATURE:

Laurel L. Grammig

Laurel L. Grammig

4/14/98

813-277-4777

CR2E034 (10/97)