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 # **P9600000905**1. Corporation Name

FLORIDA STATE DISCOUNT INSURANCE & AUTO TAGS AT CORAL SPRINGS, INC.

Prii	rcipal	Place o	t Business
P. 0). BOX	5347	

Mailing Address

P O BOX 5347

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90168 027 ***158.75



FORT LAUDERDALE FL 33310		FORT LAUDERDALE FL 33310		DO NOT WRITE IN 1	THIS SPACE				
			DO NOT WRITE IN THIS SPACE						
					3. Date Incorporated or Qualifed				
					12/27/1995				
A	ace of Business	2a. Mailing Address		4. FEI Number		pplied For			
27 4161 NW 5 STreet		26		65-0625028		ot Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
23 Y V	Country	Zip	Country						
24 333 N	17 25 USA	29 30			Personal Property Tax. Yes No				
<u>ا ت در المع</u>	9. Name and Address of Current	11	<u>' </u>	10. Name and Address of New Registered Agent					
	3. Haile and Address of Content	TOGISTOICE AGUIT	81	Name					
DOY	LE, PATRICK D		L.						
	N.W. 5TH STREET		82	82 Street Address (P.O. Box Number is Not Acceptable)					
	TATION FL 33317		83	-					
יירטיי	TIATION I E 33311								
			84	City		FL 85 Zip	Code		
11 Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes.	the above	e-named	corporation submits this statement for the purpos	e of changing it	s registered		
office or re	onistered agent, or both, in the State of	' Finrida. Such change was auth	orized by	the corbo	oration's board of directors. I hereby accept the a	ppointment as re	egistered		
agent. I ar	n familiar with, and accept the obligation	ons of, Section 607.0505, Florida	s Statutes	i.			J		
SIGNATURE	Signature, typed or printed name of registered agent a	ANOTE: De	sistered Appr	at elebatura e	equired when reinstating) DAT				
12.	OFFICERS AND		13.	it signature i	ADDITIONS/CHANGES TO OFFICER		ORS IN 12		
	TD OFFICERS AND	DELETE	1.1 TITLE		ADDITIONO///WWW.DEG TO 011/02/	Change			
TITLE			1.2 NAME		sas Altachones	7	_		
NAME	LAWSON, EDWARD				see Attachmen for all changes/	0 4 •	. (
STREET ADDRESS	2107 S ANDREWS AVE			(ADDRESS	for all changes/	K G.			
CITY-ST-ZIP	FT. LAUDERDALE FL 33316		1.4 CITY-S	T-ZIP		Change	Addition		
TITLÉ	PD	☐ DELETE	2.1 TITLE			[MCHange	L Addition		
NAME .	LAWSON, MICHELE		2.2 NAME			•			
STREET ADORESS	2107 S ANDREWS AVE		2.3 STREE	TADDRESS		•			
CITY-ST-ZIP	FT. LAUDERDALE FL 33316		2.4 CITY-5	ST-ZIP					
TITLE	SD	DELETE	3.1 TITLE			Change	☐ Addition		
NAME			3.2 NAME				J		
STREET ADDRESS	AAAT A ALIAMPINA DIE		3.3 STREE	TADDRESS			ļ		
CITY-ST-ZIP	T. T		3.4. CITY-5						
TITLE	D	☐ DELETE	4.1 TITLE			Change	☐ Addition		
NAME	RAYMOND, RONALD A.		4, 2 NAME			1			
i	•		4.3 STREET				ì		
STREET ADDRESS	2107 S ANDREWS AVE								
CITY+ST-ZIP	FT. LAUDERDALE FL 33316	S OF ETE	4.4 CITY-S	T-ZIP		Change	Addition		
TITLE	D	X DELETE	5.1 TITLE 5.2 NAME			∟ Change			
NAME	KRAMER, BRUCE H.						1		
STREET ADDRESS	2107 S ANDREWS AVE			TADORESS					
CITY-ST-ZIP	FT. LAUDERDALE FL 33316		5.4 CITY-S	T-ZIP					
TITLE	D	☐ DELETE	6.1 TITLE			Change	☐ Addition		
NAME	LEONARD, CARLA L.		6.2 NAME						
STREET ADDRESS	2107 S ANDREWS AVE		6.3 STREE	TADDRESS			{		
					1				

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, with all other like empowered.

SIGNATURE:

FLORIDA STATE DISCOUNT INSURANCE AND AUTO TAGS

AT CORAL SPRINGS, INC. DOCUMENT #P96000000905 ATTACHMENT

14999D-90168-27 P96000000005

ADDITIONS/CHANGES: Officers & Directors

1.	Kent M. Linder 4161 N.W. 5th Street Plantation, FL 33317	P
2.	Patrick D. Doyle 4161 N.W. 5th Street Plantation, FL 33317	SD
3.	Michele V. Lawson 4161 N.W. 5th Street Plantation, FL 33317	TD
4.	Edward J. Lawson 4161 N.W. 5th Street Plantation, FL 33317	D
5.	Ronald A. Raymond 4161 N.W. 5th Street	D

6. Carla L. Leonard 4161 N.W. 5th Street Plantation, FL 33317

Plantation, FL 33317

- 7. Bruce F. Simberg 4161 N.W. 5th Street Plantation, FL 33317
- 8. Joseph A. Epstein 4161 N.W. 5th Street Plantation, FL 33317

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DELETIONS: Officers & Directors

- Robert A. Sandler
 2107 South Andrews Ave
 Fort Lauderdale, FL 33316
- Bruce H. Kramer
 2107 South Andrews Ave
 Fort Lauderdale, FL 33316

SD

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