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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 29 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000011854 (2)

WESTERN UNDERWRITING MANAGER, INC.

SIGNATURE: JUHN A. BALDAIN (18)

7100 S. HIGHWAY 17-92 7100 S. HIGHWAY 17-92 FERN PARK FL 32730 FERN PARK FL \$2730-2044 3. Date Incorporated or Qualified 3a. Date of Last Report 01/31/1996 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zio Zip Country 8. This corporation has liability for intangible tax under s. 199.032. Yes No Florida Statutes 24 25 29 30 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name BALDWIN, JOHN A 7100 S. HIGHWAY 17-92 Street Address (P.O. Box Number is Not Acceptable) FERN PARK FL 32730 83 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent a gnature required when reinstating) Sign time ityliket or printed name of registered agent and title if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Addition Change THE **PSTD** DELETE 1.1 TITLE BALDWIN, JOHN A 1.2 NAME NAME 7100 S. HIGHWAY 17-92 1.3 STREET ADDRESS STREET ADDRESS FERN PARK FL 32730 1.4 CiTY-\$T-ZIP OffriST DELETE Change ☐ Addition TITLE 2.1 TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CHY-\$1-29 2. 4 CITY-\$T-ZIP DELETE Change Addition THE 3.1 TITLE NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - ZIP DELETE Addition Change 4.1 TITLE TITLE 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CHY-SI-ZIP DELETE Change Addition 5.1 TITLE THE NAME 5.2 NAME STREE! ADDRESS **5.3 STREET ADDRESS** CHTY-ST ZIP 5.4 CITY - ST - ZIP Change Addition DELETE 6.1 TITLE 11716 NAME 6.2 NAME SUBJECT ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 14. I do 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.