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Apr 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT #
1. Corporation Name

P96000016193

PEAK INSURANCE GROUP OF FLORIDA, INC.

Principal Place of Business

Mailing Address

3. Date Incorporated or Qualified

February 19, 1996

3a. Date of Last Report

N/A

4. FEI Number

93-1208140

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 has liability for intangible tax under s. 190.032,
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21. 2800 North Central Avenue

26. 2800 North Central Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. 500

27. 500

City & State

City & State

23. Phoenix, Arizona

28. Phoenix, Arizona

Zip

Country

Zip

Country

24. 85004

25. U.S.

29. 85004

30. U.S.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT Corporation System
1200 South Pine Island Road
Plantation, Florida 33324

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above-named corporation submits this statement for the purpose of changing its registered agent as provided in Section 607.0502 and 607.1508, Florida Statutes. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and undertake to accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Director)

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

12.1 President ☐ DELETE
Michael J. Minnaugh
2800 North Central Avenue, Suite 500
Phoenix, AZ 85004
12.2 Secretary ☐ DELETE
Michael J. Minnaugh
2800 North Central Avenue, Suite 500
Phoenix, AZ 85004
12.3 Treasurer ☐ DELETE
Michael J. Minnaugh
2800 North Central Avenue, Suite 500
Phoenix, AZ 85004
12.4 Director ☐ DELETE
Michael J. Minnaugh
2800 North Central Avenue, Suite 500
Phoenix, AZ 85004
12.5 Director ☐ DELETE
Charles J. LeSueur
2800 North Central Avenue, Suite 500
Phoenix, AZ 85004
12.6 Director ☐ DELETE
John E. Peterson
2800 North Central Avenue, Suite 500
Phoenix, AZ 85004

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE ☐ Change ☐ Addition
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY - ST - ZIP ☐ Change ☐ Addition
13.5 TITLE ☐ Change ☐ Addition
13.6 NAME
13.7 STREET ADDRESS
13.8 CITY - ST - ZIP ☐ Change ☐ Addition
13.9 TITLE ☐ Change ☐ Addition
13.10 NAME
13.11 STREET ADDRESS
13.12 CITY - ST - ZIP ☐ Change ☐ Addition
13.13 TITLE ☐ Change ☐ Addition
13.14 NAME
13.15 STREET ADDRESS
13.16 CITY - ST - ZIP ☐ Change ☐ Addition
13.17 TITLE ☐ Change ☐ Addition
13.18 NAME
13.19 STREET ADDRESS
13.20 CITY - ST - ZIP ☐ Change ☐ Addition

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-04/15/97--01003--027
***165.00

4-14
JH

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the information furnished in 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 a director of the corporation or the officer 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: Michael J. Minnaugh
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael J. Minnaugh, March 15, 1997

(602) 274-1111