

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

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Feb 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000029042 (4)

1. Corporation Name

MULLIS AND READER INSURANCE AGENCY, INC.

Principal Place of Business

4301 11TH AVE E
BRADENTON FL 34208

Mailing Address

4301 11TH AVE E
BRADENTON FL 34208-9022



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 3201 26th ST. W.		26 3201 26th ST. E		03/26/1996	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	Applied For
23 BRADENTON, FL		28 BRADENTON, FL		65-0656243	Not Applicable
24 34205		29 34205		5. Certificate of Status Desired	\$8.75 Additional Fee Required
25 MAINE		30 USA		6. Election Campaign Financing	\$5.00 May Be Added to Fees
				Trust Fund Contribution	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes					
Yes <input type="checkbox"/> No <input type="checkbox"/>					

9. Name and Address of Current Registered Agent

MULLIS, TAMMY E
4301 11TH AVE E
BRADENTON FL 34208

10. Name and Address of New Registered Agent

81 Name ELVEN D. MULLIS
82 Street Address (P.O. Box Number is Not Acceptable)
3201 26th ST. W.
83
84 City BRADENTON FL 85 Zip Code 34205

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 ELVEN D. MULLIS *Elven D. Mullis* 2/14/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	READER, ROBERT K	1.2 NAME	
STREET ADDRESS	1007 CHATHAM CT	1.3 STREET ADDRESS	
CITY - ST - ZIP	SAFETY HARBOR FL 34821	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	D
NAME	MULLIS, TAMMY E	2.2 NAME	THAO KELLY MULLIS
STREET ADDRESS	4301 11TH AVE E	2.3 STREET ADDRESS	4301 11th AVE, EAST
CITY - ST - ZIP	BRADENTON FL 34208	2.4 CITY - ST - ZIP	BRADENTON, FL 34205
TITLE	D	3.1 TITLE	
NAME	MULLIS, ELVEN D	3.2 NAME	
STREET ADDRESS	4812 26TH AVE W	3.3 STREET ADDRESS	
CITY - ST - ZIP	BRADENTON FL 34209	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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.

SIGNATURE: ELVEN D. MULLIS *Elven D. Mullis* 2/14/97 9417273300

CFR2034 (9/96)