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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000032864 (6)

CAROLE HOWERTON INSURANCE SERVICES, INC.

FILED Apr 15 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address	Mailing Address		I IBBHIDDI FID IBHED BHEN DBHIN DBHIN DBHIN DEFAD FINND NEDH NDHO DHAN DHAN DHAN DHAN DHAN DHAN DHAN DHAN
1173 SOUTHEAST SECOND TERRACE 1173 SOUTHEAST SECOND			SECOND TERRA	CF	
DEERFIELD BEACH FL		DEERFIELD BEACH FL		IOL	DO NOT INDITE 11 THE ODA OF
					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
					· '
2. Principal Place of Business 2a. Mailing Address					04/11/1996 4. FEI Number Applied For
21		26			65-0663028 Not Applicable
Suite, Apt. #, etc.			Suite, Apt #, etc.		\$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State		City & State			Election Campaign Financing \$5.00 May Be
23	28				Trust Fund Contribution
Zip	Country	<u></u> ⊢₁ ·	Zip Country		8. This corporation owes or has paid the current year Intangible
24	25 Name and Address of Curr	ent Registered Agent	30		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
9, Name and Address of Current Registered Agent					
HOWERTON, CAROLE 1173 SOUTHEAST SECOND TERRACE]	81 Name	
	73 SOUTHEAST SECOND TERI ERFIELD BEACH FL	TAUE		82 Street	Address (P.O. Box Number is Not Acceptable)
	LITTELL DEAUTH FL		<u> </u>	B3	
			1		
				64 City	FL 85 Zip Code
44. Purposed to the provisions of Sections 607 0502 and 607 1509. Elevide Statutes, the physics are provided extraction authority 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 fapiliar with, and accept the obligations of Section 607.0505, Florida Statutes.					
SIGNATURE CALLE WOWLE TO BE					
	Signature, typed or printed name of registered a			Agent signature	required when reinstating) DATE
12.	D OFFICENS A	ND DIRECTORS DELETI	13. E 1.1 701	1.5	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	HOWERTON, CAROLE		1.2 NA		
STREET ADDRESS 1173 SOUTHEAST SECOND TERRAC) TERRACE		REET ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH FL	, ILIII/IOL		Y-ST-ZIP	
TITLE		☐ DELET			Change Addition
NAME			2.2 NA	ME	
STREET ADDRESS			2.3 STF	REET ADDRESS	
CITY-ST-ZIP				TY - ST - ZIP	
TITLE		☐ DELETE	9.1 THT	LE	Change Addition
NAME			3.2 NA		
STREET ADDRESS			3.3 STF	REF1 ADDRESS	
CITY-ST-ZIP		T No. 17 To		TY-ST-ZIP	Other Charge
TITLE		DELETE			L Change L Addition
NAME ATTRET ADDRESS			4. 2 NA		
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP TITLE		DELETE		Y-S1-ZIP	Change Addition
NAME		L. Deter	5.1 III		
STREET ADDRESS				ME HEET ADDRESS	•
CITY-ST-ZIP				Y-SI-ZIP	
TITLE		DELETE			☐ Change ☐ Addition
NAME			6.2 NA		
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP				Y-\$T- <i>Z</i> IP	
	L		3. 7 0/1		L

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 andress

3/21/08