

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

FILED
Apr 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000061218 (9)

1. Corporation Name

CITYWIDE INSURANCE SERVICES, INC.

Principal Place of Business

2107 SOUTH ANDREWS AVENUE
FORT LAUDERDALE FL 33316
US

Mailing Address

2107 SOUTH ANDREWS AVENUE
FORT LAUDERDALE FL 33316
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/23/1996

4. FEI Number

65-0679513

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

25 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SANDLER, ROBERT A
3201 NORTH FEDERAL HWY
STE. 201
FORT LAUDERDALE FL 33306

81 Name Sandler, Robert A.

82 Street Address (P.O. Box Number is Not Acceptable)
2107 South Andrews Ave

83

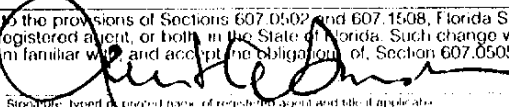
84 City Ft Lauderdale

FL

85 Zip Code 33316

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



(NOTE: Registered Agent signature required when reinstating)

DATE

3/31/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME RD
STREET ADDRESS LAWSON, EDWARD J
CITY-ST-ZIP 3201 NORTH FEDERAL HWY, STE. 201
FORT LAUDERDALE FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME see attachment for
1.3 STREET ADDRESS complete updated list of officers
1.4 CITY-ST-ZIP and directors

TITLE ☐ DELETE
NAME SD
STREET ADDRESS SANDLER, ROBERT A
CITY-ST-ZIP 3201 NORTH FEDERAL HWY, STE. 201
FT. LAUDERDALE FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME D
STREET ADDRESS RAYMOND, RONALD A
CITY-ST-ZIP 3201 NORTH FEDERAL HWY, STE. 201
FT. LAUDERDALE FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME TD
STREET ADDRESS LAWSON, MICHELLE V
CITY-ST-ZIP 3201 NORTH FEDERAL HWY, STE. 201
FT. LAUDERDALE FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME D
STREET ADDRESS SILVERMAN, ROBERT J
CITY-ST-ZIP 3201 NORTH FEDERAL HWY, STE. 201
FT LAUDERDALE FL

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME D
STREET ADDRESS KRAMER, BURCE H
CITY-ST-ZIP 3201 NORTH FEDERAL HWY, STE. 201
FT. LAUDERDALE FL

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE:



3/31/98

CR2E034 (10/97)

**CITYWIDE INSURANCE SERVICES, INC.
DOCUMENT #P96000061218
ATTACHMENT**

Officers & Directors

- | | | |
|----|--|----|
| 1. | Barfield, John D.
2107 South Andrews Avenue
Ft Lauderdale, FL 33316 | P |
| 2. | Sandler, Robert A.
2107 South Andrews Avenue
Ft Lauderdale, FL 33316 | SD |
| 3. | Lawson, Michele V.
2107 South Andrews Avenue
Ft Lauderdale, FL 33316 | TD |
| 4. | Lawson, Edward J.
2107 South Andrews Avenue
Ft Lauderdale, FL 33316 | D |
| 5. | Raymond, Ronald A.
2107 South Andrews Avenue
Ft Lauderdale, FL 33316 | D |
| 6. | Kramer, Bruce H.
2107 South Andrews Avenue
Ft Lauderdale, FL 33316 | D |
| 7. | Leonard, Carla L.
2107 South Andrews Avenue
Ft Lauderdale, FL 33316 | D |
| 8. | Simberg, Bruce F.
2107 South Andrews Avenue
Ft Lauderdale, FL 33316 | D |