FILE NOW: FILING FEE A PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED Apr 20, 1999 8:00 am Secretary of State 04-20-1999 90269 050 ***150.00		
OCCUMENT # P97000 . Corporation Name AFFILIATED INSURANCE GROUP, I		7062			181 (181) (NALL BOID TILL	1940 - 1001
Principal Place of Business	м	ailing Address				
26 S.R. 54 ITTE B W PORT RICHEY FL 34653	SU	26 S.R. 54 ITE B W PORT RICHEY FL 34653		DO NOT WRITE IN TH	HIS SPACE	
W FURI RIUREI FL 34033 .	NE			3. Date Incorporated or Qualifed 02/21/1997		
Principal Place of Business	2a 26	Mailing Address		4. FEI Number 59-3443529	-: Applied Not Ap	f For plicable
Suite, Apt. #, etc.	27	Suite, Apt. #, etc.		5. Certifcate of Status Desired	• \$8.75 Addit Fee Require	
City & State	28	City & State		6. Election Campaign Financing	\$5.00 May Added to Fe	
Zip Country	20	Zip (30)	Country	8. This corporation owes the current year Personal Property Tax.		
9. Name and Address of Curren	nt Regis	stered Agent	81 Name	10. Name and Address of New Registen	ed Agent	- n-
6645 RIDGE ROAD PORT RICHEY FL 34668	of Flori	da. Such change was author	ized by the corporati	Foration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its regipointment as registe	stered
PORT RICHEY FL 34668 Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the obliga GNATURE Signature, typed or printed name of registered agent	e of Florie ations of ant and title	da, Such change was authon , Section 607.0505, Florida S if applicable. (NOTE: Regist	84 City e above-named corp ized by the corporati Statutes, tared Agent signature require	on's board of directors. I hereby accept the ap	of changing its regipointment as registe	stered ared
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