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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000027724 (8)

BRIAN PATRICK'S INSURANCE GROUP, INC.

Principal Place of Business

5823 LAKE WORTH ROAD

Block 12 or Block 13 if change

or on an attachment with an addre

Mailing Address

5823 LAKE WORTH ROAD

FILED May 20 1998 8:00am Secretary of State

561



GREENACRES FL 33463 GREENACRES FL 33463 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>03/26/1997</u> 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt #, etc \$8.75 Additional 22 Fee Required City & State City & State **\$5.00** May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HOWARD, BRIAN P 2746 LANTANA ROAD 82 Street Address (P.O. Box Number is Not Acceptable) APT. 407 83 LANTANA FL 33462 84 City 85 Zip Code 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: (speed or printed true in of registered agent and blient approable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELFTE 1.1 THE ☐ Change Addition HOWARD, PATRICK J NAME 1.2 NAME **8181 WHITE ROCK CIR** STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BEACH FL 33436** CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE TITLE Change 2.1 TITLE Addition NAME HOWARD, BRIAN P 2.2 NAME **2746 LANTANA RD APT 407** STREET ADDRESS 2.3 STREET ADDRESS LANTANA FL 33462 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change TITLE Addition 3.1 TITLE NAME **HOWARD, DEBORAH** 3.2 NAME 8181 WHITE ROCK CIR STREET ADDRESS 3.3 STREET ADDRESS **BOYNTON BEACH FL 33436** CITY-ST-ZIP 3.4. CITY - S1 - ZIP DELETE TITLE Change 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE ☐ DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change ___ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - 7IP

14. Thereby 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