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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000043126

1. Corporation Name							
FERNET INSURANCE MANAGEMENT, INC.							
}	MOOIN MOE INDIVIGENIE!	, 1110			4 (88)(88) (18 :8(1) /88); 88(3) 88(1) 88(1) 88(1)		(1858 B()) (88)
]	,						
Principal Plac	on of Business	Mailing Address					4  4
Principal Place of Business Mailing Address							
4307 VINELAND RD., STE. H-2   ORLANDO FL 32811   ORLANDO FL 32811			2				
ONLANDO FE	32011	UNLANDO PE 32011			DO NOT WRITE IN THIS S	DACE	
					3. Date Incorporated or Qualifed	PACE	
					05/19/1997		
2. Principal F	Place of Business	2a. Mailing Address			4 FEI Number	I An	plied For
21		26			59-3450378		t Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			33 3430070	\$8.75 A	
22	.,	27			5 Certifcate of Status Desired	Fee Re	
City & Stat	te	City & State			The New Occasion Property of		
23		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00	
Zip	Country Zip Cou			,		Added to	rees
24	25	29 3	_ `		This corporation owes the current year Intar Personal Property Tax.	7	□No
	9. Name and Address of Current		<u> </u>		10 Name and Address of New Registered Ad	_	□NO
	g. Name and Madress of Content	registered Agent	81	Name	10, Maine and Address of New Registered A	Jerit	
Benzikie, Peter a				, vanno			
4307 VINELAND RD., STE. H-2				Street Ad	ddress (P.O. Box Number is Not Acceptable)		
ORLANDO FL 32811			00		. wm4.45		
0112 1100 1 E 02011			83				
				City		85 Zip C	ode
				1	FL		i
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	· · ·						ļ
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature require					uired when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		]	Change	☐ Addition
NAME	Benzikie, Peter A		1.2 NAME				
STREET ADDRESS	4307 VINELAND RD., STE. H-2		1.3 STREE	ADDRESS			Į
CITY-ST-ZIP	ORLANDO FL 32811		1.4 CITY-S	r. 7IP			
TITLE	Р					Change	Addition
NAME	ROWLAND, B A	_	2.2 NAME	1			
STREET ADDRESS	4307 VINELAND RD, STE H2		2.3 STREET	. 4505500			
	ORLANDO FL 32811		i		i		
CITY-ST-ZIP	ORLANDO FE 32011	☐ DELETE	2. 4 CITY- S	T-ZIP		7.0	C • 140
		☐ DECE1E	3.1 TITLE		L	] Change	Addition
NAME			3.2 NAME				ļ
STREET ADDRESS			3.3 STREET	ADDRESS			1
CITY-ST-ZIP			3.4. CITY-S	T-ZIP	•		
TITLE		☐ DELETE	4.1 TITLE			_ Change	☐ Addition
NAME			4. 2 NAME		•		ļ
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 C/TY-\$1	-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME		•	-	J
STREET ADDRESS			5.3 STREET	ADDRESS			}
CITY-ST-ZIP			5.4 CITY-S1	-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, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADORESS 6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

1-29-98 407-481-8581

☐ Change

☐ Addition

**FILED** 

Feb 19, 1999 8:00am

**Secretary of State** 

02-19-1999 90024 019 \*\*\*150.00

R2E034 (11/98)