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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000070289 (8)

INSURANCE BUREAU OF COLLECTIONS AND INVESTIGATIO NS. INC.

FILED Mar 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2536 COUNTRYSIDE BOULEVARD 2536 COUNTRYSIDE BOULEVARD SIXTH FLOOR SIXTH FLOOR DO NOT WRITE IN THIS SPACE **CLEARWATER FL 34623 CLEARWATER FL 34623** 3. Date Incorporated or Qualified 08/13/1997 2a. Mailing Address 2. Principal Place of Business Applied For FEL Number 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Added to Fees 28 Trust Fund Contribution Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ¥¥ Yes 24 25 29 30 Personal Property Tax due June 30. ∏ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 DOUDNA, HEATHER L 2536 COUNTRYSIDE BOULEVARD Street Address (P.O. Box Number is Not Acceptable) SIXTH FLOOR R3 CLEARWATER FL 34623 City 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) P/S/40DITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. D DELETE Change Addition TITLE 1.1 TITLE NORTH, TIMOTHY O. NAME NORTH, TIMOTHY O 1.2 NAME 2536 Countryside Blvd., Sixth Floo 2536 COUNTRYSIDE BOULEVARD, SIXTH FLOOR STREET ADDRESS 1.3 STREET ADDRESS Clearwater, FL 34623 **CLEARWATER FL 34623** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME 22 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition 3.1 TITLE Change TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS **5.3 STREET ADDRESS** 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ■ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP

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 of the Tyciver 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 cha

2/26/98 (813)7260726 Pres Timothy O. North