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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P97000083852 (8)

INTEGRITY FIRST INSURANCE CORPORATION

FILED Apr 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 12794 FOREST HILL BLVD., STE. 34 12794 FOREST HILL BLVD., STE. 34 WELLINGTON FL 33414 WELLINGTON FL 33414 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/26/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65.08 19634 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 \$5.00 May Be 6. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Zio 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 John**so**n, Robert e 12794 FOREST HILL BLVD., STE. 34 Street Address (P.O. Box Number is Not Acceptable) WELLINGTON FL 33414 83 Zip Code ons 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered to the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of the obligations of, Section 607.0505, Florida Statutes. 11. Pursuant to the provis office or registeres ROBERT E. JOHNSON 4/8/98 SIGNATURE DATE inled name of registered agent and lifte if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE 1.1 TITLE change TITLE P/D BARKER, LEX L 1.2 NAME NAME BARKER, LEX L. 2860 CESNA WAY 2860 CESNA WAY STREET ADDRESS 1.3 STREET ADDRESS WELLINGTON FL 33414 1.4 CITY - ST - ZIP 33414 CITY-ST-ZIP WELLINGTON, Change X Addition **X** DELETE TITLE 2.1 TITLE JOHNSON, ROBERT E NAME JOHNSON, ROBBIE S. **2078 SUNDERLAND AVE.** 12794 FOREST HILL BLVD., STE.#34 STREET ADDRESS 2.3 STREET ADDRESS **WELLINGTON FL 33414** WELLINGTON, FL 33414 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change x Addition 3.1 TITLE TITLE VP/D PEDUTO, PATRICK J NAME 3.2 NAME BRODY, JANETH 3940 BUTTERCUP CIRCLE STREET ADDRESS 3.3 STREET ADDRESS 212 ALEXANDER PALM ROAD PALM BEACH GARDENS FL 33410 BOCA RATON, FL 33432 3.4 CITY-ST-ZIP CITY-ST-ZIP **X** DELETE X Addition 4.1 TITLE Change TITLE S/T/D **BUCHANAN, PETER** FRASER, CAROL 1540 OLD HICKORY ROAD NAME 4. 2 NAME 2821 N.E. 38TH ST. 4.3 STREET ADDRESS STREET ADDRESS 37027 BRENTWOOD DAVIDSON, TN LIGHTHOUSE POINT FL 33064 4.4 CITY - ST - ZIP CITY-ST-ZIP X DELETE EVP/D Change X Addition TITLE 5.1 TITLE KALEEL, KENNETH M RENZULLI, OLGA NAME 5.2 NAME 2917 S. OCEAN BLVD. **66 ISLAND DR. SOUTH** 5.3 STREET ADDRESS STREET ADDRESS HIGHLAND BEACH, FL 33487 OCEAN RIDGE FL 33435 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE COO/D Change Addition 6.1 TITLE TITLE NAME 6.2 NAME CANNELL, THOMAS 124 VISTA LUNA DRIVE STREET ADDRESS **6.3 STREET ADDRESS**

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 Block 12 or Block 13 if changed, or or an attachment with anyaddress.

Ulmlag