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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # INSURENET, INC.

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To the Brightness

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Mailing Address

FILED Apr 30 1998 8:00am Secretary of State



Principal Place of Business 805 W. MORENO STREET 605 W. MORENO STREET PENSAGOLA FL 82501 PENSACOLA FL 32501 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/20/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3472638 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 28 Trust Fund Contribution Added to Fees Zip Country Country Zio 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tex due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 GRANT, CYNTHIA L 1834 ROYAL FERN LANE Street Address (P.O. Box Number is Not Acceptable) **ORANGE PARK FL 32073** 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida 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 reinstaling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DΡ TITLE DELETE 1.1 TITLE Change Addition LEE. JAMES F NAME 1.2 NAME **605 W. MORENO STREET** STREET ADDRESS 1.3 STREET ADDRESS PENSACOLA FL 32501 CITY-ST-ZIP 1.4 CfTY-ST-ZIP DELETE TITLE Change Addition 21 TITLE HOSTICK, DALE V NAME 22 NAME **605 W. MORENO STREET** STREET ADDRESS 2.3 STREET ADDRESS PENSACOLA FL 32501 CITY-ST-ZIP 2. 4 CITY-\$1-ZIP DELETE Change TITLE 3.1 TITLE Addition LEE, PAGE B 3.2 NAME 605 W. MORENO STREET STREET ADDRESS 3.3 STREET ADDRESS PENSACOLA FL 32501 CITY-ST-ZIP 3.4. CITY-ST-ZIP Addition DELETE TITLE 4.1 TITLE GRANT, CYNTHIA L NAME 4. 2 NAME 1834 ROYAL FERN LANE 605 W. MORENO STREET STREET ADDRESS 4.3 STREET ADDRESS PENSACOLA FL 32501 PARK, FL 32073 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 51 TITLE Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. 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 compation 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 address.

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