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May 04, 1999 8:00 am
Secretary of State

05-04-1999 90042 019 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000085879

1. Corporation Name
NBM AGENCY, INC.



Principal Place of Business 28050 US HWY 19 N. STE 304 CLEARWATER FL 33761
Mailing Address 28050 US HWY 19 N. STE 304 CLEARWATER FL 33761

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/01/1998
4. FEI Number 59-3534974 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business 21 4301 LAVENDER DRIVE 22 PALM HARBOR, FLORIDA 24 34685 25 PINELLAS
2a. Mailing Address 26 4301 LAVENDER DRIVE 27 PALM HARBOR, FLORIDA 28 34685 29 PINELLAS 30

9. Name and Address of Current Registered Agent
FERENCHIK, CYNTHIA E
28050 US HWY 19 N, STE 304
CLEARWATER FL 33761

10. Name and Address of New Registered Agent
81 Name CYNTHIA E. FERENCHIK
82 Street Address (P.O. Box Number is Not Acceptable) 4301 LAVENDER DRIVE
83
84 City PALM HARBOR FL 85 Zip Code 34685

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 Cynthia Ferenchik CYNTHIA E. FERENCHIK PRESIDENT 4/27/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE D DELETED
NAME FERENCHIK, CYNTHIA E
STREET ADDRESS 28050 US HWY 19 N, STE 304
CITY-ST-ZIP CLEARWATER FL 33761
TITLE D DELETED
NAME HAHN, CHARLES R
STREET ADDRESS 28050 US HWY 19 N, STE 304
CITY-ST-ZIP CLEARWATER FL 33761
TITLE DELETED
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETED
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETED
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME CYNTHIA E. FERENCHIK
1.3 STREET ADDRESS 4301 LAVENDER DRIVE
1.4 CITY-ST-ZIP PALM HARBOR, FL 34685
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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.

SIGNATURE: Cynthia Ferenchik CYNTHIA E. FERENCHIK 727-934-7046
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (11/98)