

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

FILED
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90049 029 ***150.00

DOCUMENT # P98000087381

1. Corporation Name

INTEGON MARKETING, INC.

Principal Place of Business

770 W. GRANADA BLVD. #250
ORMOND BEACH FL 32174

Mailing Address

770 W. GRANADA BLVD. #250
ORMOND BEACH FL 32174

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/06/1998

4. FEI Number

59-3538290

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 2570 W. Int'l Speedway Blvd

2a. Mailing Address

26 P.O. Box 10324

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 100

27

City & State

23 Daytona Beach FL

City & State

28 Daytona Beach FL

Zip Country

Zip Country

24 32114

25

29 32120-0324

30

9. Name and Address of Current Registered Agent

GORNT0, L A JR.
149-F S. RIDGEWOOD AVENUE
DAYTONA BEACH FL 32114

10. Name and Address of New Registered Agent

81 Name

DERRICK Mims

82 Street Address (P.O. Box Number is Not Acceptable)

2570 West International Speedway Blvd

83 Suite 100

84 City

Daytona Beach

FL

85 Zip Code

32114

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSTD ☐ DELETE
NAME MIMS, DERRICK R
STREET ADDRESS 770 W. GRANADA BLVD. #250
CITY-ST-ZIP ORMOND BEACH FL 32174

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PSTD ☒ Change ☐ Addition
1.2 NAME MIMS, DERRICK R.
1.3 STREET ADDRESS 2570 W. International Speedway Blvd.
1.4 CITY-ST-ZIP Daytona Beach FL 32114

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Derrick R. Mims 4/13/99 904253-4900

Date

Daytime Phone #

CR2E034 (1/98)