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May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S01731 (6)
1. Corporation Name
HERB NICHOLS INSURANCE AND INVESTMENTS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 4343 RIDGEWOOD AVE. SUITE A PORT ORANGE FL 32127 US		Mailing Address 4343 RIDGEWOOD AVE SUITE A PORT ORANGE FL 32127 US	
2. Principal Place of Business 21 2458 GRANADA DR Suite, Apt. #, etc. 22		2a. Mailing Address 26 2458 GRANADA DR Suite, Apt. #, etc. 27	
City & State 23 So Daytona FL Zip 24 32119		City & State 28 So Daytona FL Zip 29 32119	
Country 25 Volusia		Country 30 Volusia	
g. Name and Address of Current Registered Agent NICHOLS, HERBERT L. 1221 AVENIDA DEL TORO DAYTONA BEACH FL 32119			
10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 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 *Herbert L. Nichols* (NOTE: Registered Agent signature required when reinstating) DATE 4-27-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NICHOLS, HERBERT L.	1.2 NAME	
STREET ADDRESS	1221 AVENIDA DEL TORO	1.3 STREET ADDRESS	2458 Granada Dr
CITY-ST-ZIP	DAYTONA BCH FL	1.4 CITY-ST-ZIP	So Daytona FL 32119
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NICHOLS, DORIS E.	2.2 NAME	
STREET ADDRESS	1221 AVENIDA DEL TORO	2.3 STREET ADDRESS	2458 Granada Dr
CITY-ST-ZIP	DAYTONA BCH FL	2.4 CITY-ST-ZIP	So Daytona FL 32119
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE *Herbert L. Nichols* 407 313-2897

CR2E034 (10/97)