

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S12330** (4)
1. Corporation Name
INSIGHT DEVELOPMENT INC.



Principal Place of Business
**1246 N. LAKEWAY
PALM BEACH FL 33480**

Mailing Address
**1246 N. LAKEWAY
PALM BEACH FL 33480**

3. Date Incorporated or Qualified 11/09/1990	3a. Date of Last Report 02/01/1995
4. FEI Number 13-3591725	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 has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21 1246 N. Lake Way State, Apt. #, etc. 22 Palm Beach City & State 23 FL Zip 24 33480	2a. Mailing Address 26 1246 N. Lake Way State, Apt. #, etc. 27 Palm Beach City & State 28 FL Zip 29 33480 Country 25 U.S. 30 U.S.
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9. Name and Address of Current Registered Agent

**BAKER, KANE K
1246 N. LAKE WAY
PALM BEACH FL 33480**

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 FL

11. Pursuant to the provisions of Sections 607.0602 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 607.0602, Florida Statutes.

SIGNATURE

Kane K. Baker

(If the Registered Agent signs, the corporation must also sign.)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD BAKER, KANE, K 1246 N LAKE WAY PALM BCH FL	☐ DELETE
2. TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ DELETE
3. TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ DELETE
4. TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ DELETE
5. TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	☐ Change ☐ Addition
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	☐ Change ☐ Addition
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	☐ Change ☐ Addition
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	☐ Change ☐ Addition
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	☐ Change ☐ Addition
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kane K. Baker

1/23/96 401881-7105

CR2E034 (12/95)