## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

VLONTIS INSURANCE SERVICES, INC.

		1	

**FILED** Apr 09 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					r regisale ine tradicidat kana sieti aidi didit did	its mindi diber mini	YI MINIT HAND	
716 BIRD BAY DR W VENICE FL 34292 716 BIRD BAY DR W VENICE FL 34292						DO NOT WRITE IN THIS	S SPACE	
						3. Date Incorporated or Qualified		
						12/26/1990		
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	Ar	oplied For
1		26				65-0235059	Nc	ot Applicable
_ Suite, Apt. ≉	t, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	<b>+</b>	Additional
2		27					Fee Re	Beriupe
City & State		City & State				6. Election Campaign Financing	\$5.00	
3		28				Trust Fund Contribution		to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid the c		
4	9. Name and Address of Curre	nt Registered Agent	30			Personal Property Tax due June 30.  10. Name and Address of New Registered		No.
	<del></del>	air magistaran Agairt		81	Name	10, Name and Address of New Registers	, vAgain	
	INTIS, RICHARD J.		Į		110,110			
	BIRD BAY DR W			82	Street Add	Address (P.O. Box Number is Not Acceptable)		
VEN.	IICE FL 34292		ŀ	83				
			ſ					ļ
			ľ	84	City		85 Zip	Code
44 D	the anniales of Section 607 Dr	00 and 007 4500 Finda 01-	1 doo doo ah			poration submits this statement for the purpose		
office or re agent. I an	or provisions of sections 607.056 pgistered agent, or both, in the State of familiar with, and accept the oblig	e of Florida. Such change wa	as authorized	t vd b	he corpora	tion's board of directors. I hereby accept the ap	pointment as	registered
SIGNATURE :	Signature, typed or printed name of registered ag	gent and title it applicable (f	NOTE: Registered	i Agent	signature regul	red when reinstating) DATE		
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	RS IN 12
TITLE	D	DELETE	1.1 T(T	TLE			Change	Addition
NAME	VLONTIS, RICHARD J.		1.2 NA	ME	- 1			ſ
STREET ADDRESS	716 BIRD BAY DR W		1.3 ST	REET A	DORESS			
CRY-ST-ZIP	VENICE FL		1.4 CIT	TY-ST-	ZIP			
TITLE	PST	DELETE	2.1 TIT				Change	Addition
NAME	VLONTIS, RICHARD J.		2.2 NA	ME	- 1			
STREET ADDRESS	716 BIRD BAY DR W		2.3 STI	REET A	DORESS	e e e		
CITY-ST-ZIP	VENICE FL		2.4 CI	ITY-ST	- ZIP			
TITLE		☐ DELETE	3.1 TIT	TLE			Change	Addition
NAME			3.2 NA	ME				
STREET ADDRESS			3.3 ST	REET A	DDRESS			
CITY-ST-ZIP			3.4. Cf	ITY-ST	- ZIP			
TITLE		☐ DELETE	4,1 TIT	TLE			Change	Addition
NAME			4. 2 N/	AME				
STREET ADDRESS			4.3 ST	REET A	DDRESS			
CITY-ST-ZIP			4.4 CIT	TY-ST-	ZIP			
TITLE		☐ DELETE	5.1 TIT	TLE			Change	Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 ST	REET A	DDRESS			
CITY-ST-ZIP			5.4 CIT	TY-ST-	ZIP			
TITLE		DELETE	6.1 TIT	TLE			Change	Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 ST	REET A	DDRESS			
CITY-ST-ZIP			6.4 CI <sup>1</sup>	TY-S1-	ZIP			
14. I hereby c	ertify that the information supplied	with this filing does not qualit	v for the exe	emptio	on stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the	information
officer or o	director of the comparation of the rec	colver or injustion empowered	to execute t	u (nat this re	i my signati sport as req	ure shall have the same legal effect as if made quired by Chapter 607, Florida Statutes, and tha	inder oain; th t my pame ap	atiamian op∳arsin
Block 12 d	or Block 13 if charged, or other att	achigient with an address	ムー	_	1		(941	<i>'!</i>
CICHIAT	upe. #////////	11 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1 8	In	SAR	d.T.Vlon41571/98.	1100-11	062
SIGNAT		The purpose of white the standard over	CER OR DIRECT	<u>ب</u>	111100	Date 0.198	Daytime Phone	0459201