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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

MIAMI FL 33130

1996

S57871

(3)

1. Corporation Name FLORIDA INSURANCE MANAGERS, INC.

Principal Place of Business % CURTIS H. SITTERSON, ESQ. 2200 MUSEUM TOWER, 150 FLAGLER ST.

Mailing Address

% CURTIS H. SITTERSON, ESO. 2200 MUSEUM TOWER, 150 FLAGLER ST. MIAMI FL 33130



							3.	Date Incorporated or 0 06/03/1991	Qualified	3a. Date o	4/26/1	995	
21	Principal Place		2e, Malling Address 26	— — ·			4. FEI Number 65-0273108					Applied For Not Applicable	
22	Suite, Apt. #, et	c.	Suite, Apt. #, etc.	27			5.	Certificate of Status D	esired			5 Additional Required	
23	City & State		City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees						
24	Zφ	Country	Zip	<u> </u>	Country			his corporation has li			under s	199.032,	
24 25 29 30 9. Name and Address of Current Registered Agent							Florida Statutes ☐ Yes ☑ No 10. Name and Address of New Registered Agent						
						Name							
2200 MUSEUM TOWER						82 Street Address (P.C. Box Number is Not Acceptable)							
						82 Street Address (P.O. Box Number is Not Acceptable)							
		AGLER ST.		Ī	33								
	MIAMI FL	33130			34	City					05 7	in Code	
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	familiar with, ar	nd accept the obligations	607.0502 and 607.1508, Florida Sta te of Florida. Such change was autho s of, Section 607.0505, Florida Statu Stored agent and title if griff cable	mzeu ny ine ca	orpoi	ration s Do	oard of dii	rectors. I hereby accep	or the purp t the appoi	ntment as re	ging its egistered	registered office I agent. I am	
12.		OFFIC	OFFICERS AND DIRECTORS			agrata requ		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
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	- ST - 7IP												
		tify that the information s	supplied with this filing is voluntarily to	64 CITY			for the e	waystian stated in Cos	tion 110 0	7/20/00 Flacial	- 04-4-4		

roo riereby ceruly 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: Doslar

Teb. 14, 1996