

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

FILED
Mar 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S61597** (8)

1. Corporation Name
PARKWAY INSURANCE AGENCY OF NORTH LAUDERDALE, IN C.

Principal Place of Business
**7234 MCNAB ROAD
NORTH LAUDERDALE FL 33068
US**

Mailing Address
**7234 MCNAB ROAD
NORTH LAUDERDALE FL 33068-5441
US**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/24/1991	3a. Date of Last Report 05/01/1996
21. State, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 65-0269453	Applied For <input type="checkbox"/> Not Applicable		
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required		
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees		
24. Country	25. Country	29. Zip	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BERMAN, NATHAN M 9853 NW 19 ST CORAL SPRINGS FL 33071		10. Name and Address of New Registered Agent 81. Name NATHAN M BERMAN 82. Street Address (P.O. Box Number is Not Acceptable) SPRING 83. 84. City FL 85. Zip Code	
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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]* DATE: **3/6/97**
Signature type: For printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PS	<input type="checkbox"/> DELETE	1.1 TITLE NATHAN BERMAN	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BERMAN, NATHAN		1.2 NAME	
STREET ADDRESS 9853 NW 19 ST		1.3 STREET ADDRESS PLEASE CORRECT	
CITY-ST-ZIP CORAL SPRINGS FL		1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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 do 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 included 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]* DATE: **3/6/97** 9853 NW 19 ST
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)