

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT #
1. Corporation Name

576547

REAL ESTATE INSURANCE PROGRAMS, INC.

Principal Place of Business

Mailing Address

11380 Prosperity Farms Road, Ste. 201
Palm Beach Gardens, Florida 33410

3. Date Incorporated or Qualified
8/27/91

3a. Date of Last Report
4/30/96

2. Principal Place of Business

2a. Mailing Address

21 same

26 same

22 same

27 same

23 same

28 same

24 same

29 same

4. FID Number
65-0286155

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. Has corporation has liability for intangible tax under s. 191.03?
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GEORGE E. HARRIS, ESQUIRE
Harris, Kukey & Helgesen, P.A.
11380 Prosperity Farms Rd. Ste. 201
Palm Beach Gdns, FL 33410

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0647 and 607.1509, Florida Statutes, I, the undersigned, a duly qualified corporate officer, do hereby certify that the foregoing information is true and correct, and that the undersigned is a duly qualified corporate officer, and hereby accept the duties of Section 607.0605, Florida Statutes.

SIGNATURE

12. OFFICER AND DIRECTOR

NAME: ROBERT H. SMITH
President, Secretary
556 Greenway Drive
North Palm Beach, FL 33408

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

14. I, the undersigned, do hereby certify that the foregoing information is true and correct, and that the undersigned is a duly qualified corporate officer, and hereby accept the duties of Section 607.0605, Florida Statutes.

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT H. SMITH

7/96

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