PROFIT CORPORATION ANNUAL REPORT 1997	DIV	IDA DEPARTMI Sandra B. M Secretary of /ISION OF COR	ortham f State	Apr 23 1 Secreta		
OCUMENT # VO47 Corporation Name MR. AUTO INSURANCE OF SO icipal Place of Business CAPE CORAL PKWY. EAST E CORAL FL 33904	Mailing Addro	ess Dral PKWY, EA	\$T			
				3. Date Incorporated or Qualified 01/03/1992	3a. Date of Last R 04/01/1996	eport
Principal Place of Business	2a. Mailing Ad	ddress	· · · · · · · · · · · · · · · · · · ·	4. FEI Number 65-0406567	Ar	plied For
Suite Apt #, etc	26 Suite, Apt	. #, etc.	······································	5. Certificate of Status Desired	\$8.75	
City & State	27 City & Sta	te		6. Election Campaign Financing	Fee Re \$5.00	
Zip Country	28 Zip		Country	Trust Fund Contribution	Added	to Fees
25	29	30			Yes 🛄 No	. 199.032,
9. Name and Address of C LINDBACK, DAVE	Current Registered Age	nt	81 Name	10. Name and Address of New Re	gistered Agent	
			84 City		FL 85 Zip	Code
Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent 1 am familiar with, and accept the	State of Florida, Such cl	hande was auth	the above-named corr orized by the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	FL	ts registere
office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE Sulator type or principlinance of register	State of Florida, Such cl obligations of, Section 6 ered agent and little (applicable)	nange was auth 07.0505, Florida	the above-named corporation or local corporation of the corporation of	ition's board of directors. I hereby accep	PL	ls registere registered
office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE. States types reprint here of register OFF4CER	State of Florida, Such cl obligations of, Section 6 ered agent and life of applicable RS AND DIRECTORS	nange was auth 07.0505, Florida	the above-named corr orized by the corpora a Statutes.	ation's board of directors. I hereby accept	PL	ts registere registered
office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE. Solution types or printed harve of registered to the Control of the Control	State of Florida, Such cl obligations of, Section 6 ered agent and life of applicable RS AND DIRECTORS	nange was auth 07.0505, Florida (NOTE: Re	the above-named corpora orized by the corpora a Statutes. g-stered Agent signature requ 13. 1.1 IITLE 1.2 NAME	ition's board of directors. I hereby accep	PL urpose of changing it the appointment as DATE DATE DATE	registered
office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE. States types reprint here of register OFF4CER	 State of Florida, Such cl obligations of, Section 6 ered agent and life r applicable RS AND DIRECTORS 	iange was auth 07.0505, Florida (NOTE: Re	the above-named corpora orized by the corpora a Statutes. gestered Agent signature requ 13. 1.1 TITLE	ition's board of directors. I hereby accep	PL urpose of changing it the appointment as DATE DATE DATE	ts registere registered
office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE Science typed reprint have of registered to the DOFFICER DI LINDBACK, DAVE 920 SE 43RD TER CAPE CORAL FL P / T / S / CHM	State of Florida, Such cl obligations of, Section 6 ered agent and life / applicable RS AND DIRECTORS	nange was auth 07.0505, Florida (NOTE: Re	the above-named corporates a Statutes. gistered Agent signature requination of the signature requinatio of the signature requinatio	ition's board of directors. I hereby accep	PL urpose of changing it the appointment as DATE DATE DATE	ts registered registered RS IN 12
office or registered agent, or both, in the agent I am familiar with, and accept the snATURE Status type or printed name of registered to the state of registered to the sta	State of Florida, Such cl obligations of, Section 6 ered agent and life / applicable RS AND DIRECTORS	iange was auth 07.0505, Florida (NOTE: Re	the above-named corporates a Statutes. gestered Agent signature requination of the second signature r	ition's board of directors. I hereby accep	PL	ts registered registered RS IN 12
office or registered agent, or both, in the agent 1 am familiar with, and accept the INATURE Science by ear a proof more of registe OFFICEF ELADORESS S1-ZIP ELINDBACK, DAVE 920 SE 43RD TER CAPE CORAL FL P/T/S/CHM LINDBACK, DAVE 920 SE 43 TR S1-ZIP S1-ZIP	State of Florida. Such cl obligations of, Section 6 ered agent and life of anoticable IS AND DIRECTORS ID ID I. 33004	iange was auth 07.0505, Florida (NOTE: Re	the above-named corporate orized by the corporate statutes. gistered Agent signature requinant 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-2IP	ition's board of directors. I hereby accep	L Urpose of changing it the appointment as DATE Change Change	ts registered registered
office or registered agent, or both, in the agent 1 am familiar with, and accept the INATURE Science by ear provide marked registe OFFICEF ELINDBACK, DAVE 920 SE 43RD TER CAPE CORAL FL P/T/S/CHM LINDBACK, DAV: 920 SE 43 TR SI-ZIP SI-ZIP SI-ZIP	state of Florida. Such cl obligations of, Section 6 ered agent and life r applicable RS AND DIRECTORS	iange was auth 07.0505, Florida (NOTE: Re DELETE	the above-named corr orized by the corpora a Statutes. gistered Agent signature requ 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ition's board of directors. I hereby accep	PL	ts registered registered
office or registered agent, or both, in the agent 1 am familiar with, and accept the share of registered agent of the share of	State of Florida. Such cl obligations of, Section 6 ered agent and life ' applicable RIA Cay, Apt. A	Inange was auth 07.0505, Florida (NOTE: Re DELETE DELETE	the above-named corr orized by the corpora a Statutes. gistered Agent signature requ 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	ition's board of directors. I hereby accep	L Urpose of changing it the appointment as DATE Change Change	ts registered registered
office or registered agent, or both, in the agent 1 am familiar with, and accept the State of the proof have of registe OFFICEF ELINDBACK, DAVE 920 SE 43RD TER CAPE CORAL FL P/T/S/CHM LINDBACK, DAVI 920 SE 43 TR SI-7/P ELINDBACK, GLOF LINDBACK, GLOF LINDBACK, GLOF LINDBACK, GLOF 1202 Spanish (Punta Gorda, F	ID SIALE of Florida. Such cl obligations of, Section 6 red agent and life (anotcable ID L 33904 RIA Cay, Apt. A FL 33950	Inange was auth 07.0505, Florida (NOTE: Re DELETE DELETE	the above-named corr orized by the corpora a Statutes. gistered Agent signature requ 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	ition's board of directors. I hereby accep	L Urpose of changing it the appointment as DATE Change Change	Is registered registered RS IN 12 Additi
office or registered agent, or both, in the agent 1 am familiar with, and accept the share of registered have of re	State of Florida. Such cl obligations of, Section 6 ered agent and life (applicable RS AND DIRECTORS L 33904 RIA Cay, Apt. A FL 33950 RLES	ange was auth 07.0505, Florida (NOTE: Re DELETE DELETE DELETE	the above-named corr orized by the corpora a Statutes. gistered Agent signature requ 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	ition's board of directors. I hereby accep		Is registered registered RS IN 12 Additi
office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE SNATURE Status type or privation are of registered to a privation are of registered to an accept the SNATURE E D E LINDBACK, DAVE 920 SE 43RD TER CAPE CORAL FL P/T/S/CHM LINDBACK, DAVE 920 SE 43RD TER CAPE CORAL FL P/T/S/CHM LINDBACK, DAVE 920 SE 43 TR SI-7IP Cape SI-7IP Cape SI-7IP Cape SI-7IP Cape SI-7IP Cape SI-7IP Cape Coral, FI V LINDBACK, GLOI 1202 Punta <gorda, i<="" td=""> DITIONSCE, CHAF LINDBACK, CHAF</gorda,>	State of Florida. Such cl obligations of, Section 6 ered agent and life (applicable RS AND DIRECTORS L 33904 RIA Cay, Apt. A FL 33950 Cay, Apt. A	Inange was auth 07.0505, Florida (NOTE: Re DELETE DELETE DELETE	the above-named corr orized by the corpora a Statutes. a Statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-2IP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-2IP	ition's board of directors. I hereby accep		Is registere registered RS IN 12 Additi
office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE SNATURE Status type or prived name of registered agent, barrier of registered agent, and accept the OFFICER D E E1 ADDRESS SI-200 E1 ADDRESS SI-200 E1 ADDRESS SI-200 SI-200 E1 ADDRESS SI-200 SI-200 E1 ADDRESS SI-200 SI-200 E1 ADDRESS SI-200 V LINDBACK, GLOI 1202 Spanish (SI) DI-201/201/201/201/201/201/201/201/201/201/	State of Florida. Such cl obligations of, Section 6 ered agent and life (applicable RS AND DIRECTORS L 33904 RIA Cay, Apt. A FL 33950 Cay, Apt. A	ange was auth 07.0505, Florida (NOTE: Re DELETE DELETE DELETE	the above-named corr orized by the corpora a Statutes. a Statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-2IP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	ition's board of directors. I hereby accep		Is registere registered RS IN 12 Additi
office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE SNATURE Status type or provid name of registered agent, barry of registered agent, and accept the OFFICER D E D E D E E1 ADDRESS SI-200 SI-200 E1 ADDRESS SI-200 SI-200 E1 ADDRESS SI-200 SI-200 E1 ADDRESS SI-200 SI-200 P/T/S/CHM LINDBACK, DAVE 920 SE 43 TR SI-200 Cape Coral, FI V LINDBACK, GLOI 1202 Spanish (C SI-200 Punta Gorda, I E DIMIA Gorda, I E D	State of Florida. Such cl obligations of, Section 6 ered agent and life (applicable RS AND DIRECTORS L 33904 RIA Cay, Apt. A FL 33950 KLAS Cay, Apt. A FL 33950 MERT	Inange was auth 07.0505, Florida (NOTE: Re DELETE DELETE DELETE	the above-named corrorized by the corpora a Statutes. gistered Agent signature requination 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-2IP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-2IP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ition's board of directors. I hereby accep		Is registered registered RS IN 12 Addition Addition Addition
office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE SNATURE Statut type or prived name of registered r	State of Florida. Such cl obligations of, Section 6 red agent and life (any Cable ID L 33904 RIA Cay, Apt. A FL 33950 RLES Cay, Apt. A FL 33950 MERT N.	Inange was auth 07.0505, Florida (NOTE: Re DELETE DELETE DELETE	the above-named corporates a Statutes. gistered Agent signature requination of the corporates a statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-2IP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-2IP 5.1 TITLE 5.2 NAME	ition's board of directors. I hereby accep		ls registere registered
office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE SNATURE Status by or principance of registered agent, bare of registered agent, and accept the OFFICER D E LINDBACK, DAVE 920 SE 43RD TER CAPE CORAL FL P/T/S/CHM LINDBACK, DAVE 920 SE 43RD TER CAPE CORAL FL P/T/S/CHM LINDBACK, DAVE 920 SE 43 TR SI-7IP Cape SI-7IP Cape SI-7IP Cape SI-7IP Cape SI-7IP Cape SI-7IP Cape SI-7IP Punta Gorda, I E DIFILITS LINDBACK, CHAP 1202 Punta Gorda, I E DIFILITS SI-7IP Punta Gorda, I E DIFILITS Punta	State of Florida. Such cl obligations of, Section 6 red agent and life (any Cable ID L 33904 RIA Cay, Apt. A FL 33950 RLES Cay, Apt. A FL 33950 MERT N.	ange was auth 07.0505, Florida (NOTE: Re DELETE DELETE DELETE	the above-named corrorized by the corpora a Statutes. gistered Agent signature requination 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-2IP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-2IP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-2IP 6.1 TITLE 6.2 NAME	ition's board of directors. I hereby accep		Is registere registered
office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE SNATURE Statute type or principation of registered agent, barre of registered agent, and accept the OFFICEE D E LINDBACK, DAVE 920 SE 43RD TER CAPE CORAL FL P/T/S/CHM LINDBACK, DAVE 920 SE 43RD TER CAPE CORAL FL P/T/S/CHM LINDBACK, DAVE 920 SE 43 TR SI-7IP Cape Coral, FI V LINDBACK, GLOI 1202 Spanish (C) VI LINDBACK, CHAF 1202 Spanish (C) Punta Gorda, I DIFILINTACIX, CY/F LINDBACK, REHN SI-7IP Punta Gorda, F DIFILINTACIX, REHN SI-7IP Punta Gorda, F DIFILINDBACK, REHN SI-7IP PUNTA Gorda, F DIFILINDBACK, REHN SI-7IP PUNTA Gorda, F E DINDBACK, REHN SI-7IP SI-	State of Florida. Such cl obligations of, Section 6 red agent and life (any Cable ID L 33904 RIA Cay, Apt. A FL 33950 RLES Cay, Apt. A FL 33950 MERT N.	ange was auth 07.0505, Florida (NOTE: Re DELETE DELETE DELETE	the above-named corrorized by the corporation a Statutes. gistered Agent signature requination of the second statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-2IP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-2IP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-2IP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	ition's board of directors. I hereby accep		Is registered registered
office or registered agent, or both, in the agent 1 am familiar with, and accept the SNATURE SNATURE Status type or prived name of registered agent, barre of registered agent, and accept the OFFICEE D E LINDBACK, DAVE 920 SE 43RD TER CAPE CORAL FL P/T/S/CHM LINDBACK, DAVE 920 SE 43RD TER CAPE CORAL FL P/T/S/CHM LINDBACK, DAVE 920 SE 43 TR SI-ZIP Cape Cape SI-ZIP Cape Cape Cape SI-ZIP V LINDBACK, GLOH 1202 Spanish (C SI-ZIP Punta Gorda, H DIMIABACK, CHAH 1202 Spanish (C E DIMIABACK, CHAH 1202 Spanish (C Punta Gorda, H SI-ZIP Punta Gorda, H SI-ZIP Punta Gorda, H SI-ZIP P208 60th Av N Minneapolis, M	State of Florida. Such cl obligations of, Section 6 read agent and lift(' applicable RS AND DIRECTORS ID L 33904 RIA Cay, Apt. A FL 33950 KLES Cay, Apt. A FL 33950 MERT N. MN 55428 upplied with this filing do of tor supplemental annu	ange was auth 07.0505, Florida (NOTE: Re DELETE DELETE DELETE DELETE DELETE DELETE DELETE	the above-named corrorized by the corporation a Statutes. gistered Agent signature requination of the corporation of the corpo	tion's board of directors. I hereby acceptive when reinstating) ADDITIONS/CHANGES TO OFFIC		Is registered registered RS IN 12 Addition Addition Addition Addition Addition Addition Addition Addition Addition Addition Addition Addition