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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLÖRIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V52814

(3)

JAMES ROAN INSURANCE AGENCY, INC.

**FILED** Mar 26 1997 8:00am Secretary of State

	e of Business	Mailing Address				-) 38 DEL MILLEM I METAL ANDRE TRUME NOVE MANAGE MA	IMII BIBII WI	101 <b>418</b> 11 <b>8</b> 484	PIBIT INDI
1225 DONNA D FT MYERS FL 3		1225 DONNA DR FT MYERS FL 33919	-1612						
						3. Date Incorporated or Qualified 07/21/1992		e of Last F <b>6/1996</b>	Report
2. Principal Pl	lace of Business	2a. Mailing Address	<u> </u>			4. FEI Number	1	A	pplied For
1		26				65-0346232		No	ot Applicab
Suite, Apt	#, etc	Suite, Apt. #, etc 27	3.			5. Certificate of Status Desired			Additional equired
City & State	C	City & State				6. Election Campaign Financing		<del></del>	May Be
3		28				Trust Fund Contribution			to Fees
Ζip	Country	Zip	Cou	untry		8. This corporation has liability for in	ntangible t	ax under s	. 199.032,
1	25	29	30					No No	
	9. Name and Address of C	urrent Registered Agent				10. Name and Address of New Reg	Istered A	gent	
	n, James			81 1	Name				
	i Donna dr Nyers fl 33919			62 5	Street Addre	ress (P.O. Box Number is Not Acceptable)			
	,. <u>.</u>			83					
				84 (	City			<b>85</b> Zip	Code
				""  `	ony		FL	105 Lip	Out
12.	T =	S AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
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reformering the highest form the information stapping with instang does not quality for the exemption stated in section 115 or 50, priorities stated. From 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 tant 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:**