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

PROFITE CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Jan 29, 1999 8:00am Secretary of State

01-29-1999 90006 046 \*\*\*150.00

i. Corporado	MENT # 320728 - BRANNEN INSURANCE INC			
Principal Plac	pe of Business	Mailing Address	<del></del>	
950 WEST MA	IN STREET	950 WEST MAIN STREET		
INVERNESS FL		INVERNESS FL 34450	•	
US		U\$	:	DO NOT WRITE IN THIS SPACE
			· · · · · · · · · · · · · · · · · · ·	3. Date Incorporated or Qualified 09/06/1967
<b>├</b> ┐ '	Place of Business	2a. Mailing Address		4. FEI Number Applied For
Suite, Apt.	# ptc t	Suite, Apt. #, etc.	<del></del>	59-1567 162 Not Applicable
22	<u>.</u>	27	<u> </u>	5. Certifcate of Status Desired Status Desired Fee Required
City & Sta	le	City & State	<u> </u>	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25		30	Personal Property Tax. ☐ Yes ☐ No
44. 44.	9. Name and Address of Current R	legistered Agent	81 Name	10. Name and Address of New Registered Agent
	BAR, THOMAS L.		UT Name	
808	W ZEPHYR ST 48 1 2 10 C. M.C.		82 Street Ac	Idress (P.O. Box Number is Not Acceptable)
INVE	ERNESS FL 34451	7	83	र अर्थान करता है। विकास करता के स्वयंक्त करता है। वर्षा करता करता करता करता करता करता है। वर्षा करता है करता ह प्रदेश करता है। विकास करता किया किया किया किया किया करता करता करता करता करता है। वर्षा करता है करता है की किया
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		•	84 City	El 85 Zip Code
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, typed or printed name of registered agent an	d title if applicable. (NOTE:	Registered Agent signature requ	ired when reinstating) (1) DATE
12.	OFFICERS AND	<del></del>	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PST THOMAS I	☐ DELETE	1.1 TRLE	☐ Change ☐ Addition
NAME STREET ADDRESS	HAGAR, THOMAS L. 808 W ZEPHYR ST	•	1.2 NAME	
CITY-ST-ZIP	INVERNESS FL		1.3 STREET ADDRESS 1.4 City-St-Zip	10
TITLE	VD	DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	HAGAR, MARGARET		2.2 NAME	
STREET ADDRESS	808 W ZEPHR ST	,	2.3 STREET ADDRESS	
CITY-ST-ZIP	INVERNESS FLORESCHAFT CO.	* •	2.4 CITY-SY-ZIP	
TITLE NAME	VD at the contract of	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME A	HAGAR THOMAS ANDREW		3.2 NAME	
STREET ADORESS	808 W ZEPHYR ST		3.3 STREET ADDRESS	าสูงสูง (แม่งานสายการสมาชิงโดยที่มีความหลายและหารม
CITY-ST-ZIP	INVERNESS, FL 00000	·	3.4. CITY-ST-ZIP	
TITLE	VD DECORY PRAINEN	☐ DELETE	4.1 TITLE	The second of t
NAME STREET ADDRESS	HAGAR, GREGORY BRANNEN 907, GREAT PINE PT		4.2 NAME	
CITY-ST-ZIP	INVERNESS FL		4.3 STREET ADDRESS	
TITLE	The state of the	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS	mr.		5.3 STREET ADDRESS	
CITY-ST-ZIP	PSF	·	5.4 CITY-ST-ZIP	
TITLE	Production of the control of the con	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	SCS VOLGANIA SV   INVENTES ST		6.2 NAME	
STREET ADDRESS	MB to the second of the second		6.3 STREET ADDRESS	
CITY-ST-ZIP	La garage de Maria de La Garage de Carte de Car	Supplication to the time to	6.4 CITY-ST-ZIP	- 440 AT(0VI) FI - 14 A
14. I hereby of indicated officer or Block 12	certify that the information supplied with the on this annual report or supplemental and director of the corporation or the receiver on Block 13 if changed, or on an attach or	nis filing does not qualify for nual report is true and accur- or trustee empowered to ex ent with an address, with all	the exemption stated in ate and that my signatu ecute this report as req other like empowered.	Section 119.07(3)(i), Florida Statutes. I further certify that the information tre shall have the same legal affect as if made under oath; that I am an uired by Chapter 607, Florida Statutes; and that my name appears in