## 2002 UNIFORM BUSINESS REPORT (UBR)

	MENT # 61168		PRT (UB	R)	Mar 11, 2 Secretai	ry of Sta	ite j
PROGRE	SSIVE AMERICAN INSURAI	NCE COMPANY			03-11-2002 90	0037 021 ***150.	00
Principal Plac	e of Business	Mailing Address					
	ETN PARK DR	4030 CRESCETK PARK I	DR	}		,	
BULD 8 RIVERVIEW F	NT :L 33569	BULD-B AT RIVERVIEW FL 33569					
US		US					
2. Principal P リンろの	Place of Business  Crescent	3. Mailing Address WIL	SON MILL	s Rd.	1 100110 01181 HEDI 11018 HILBI 18111	EBBL BERGI BIBIL RERGI BIBIL	
Suite, Apt.		Suite, Apt. #, etc.			DO NOT WRITE	IN THIS SPACE	
City & State	ling 13	City & State		- 4 4	FEI Number	T TAI	pplied For
	·	Mayfield	Village,	<del>DH</del>	34-1094197		ot Applicable
Zip	Country	H4143	Country	5.	Certificate of Status Desired	S8.75 Add	
· · · · · · · · · · · · · · · · · · ·	6. Name and Address of Current	Registered Agent		7.	Name and Address of New Reg	gistered Agent	
INCLIDAN	ICE COMMISSIONER		Name				
	ITOL BLBG.		Street	Stratodires (8.9. Poxilyaber is Not Asseptable)		<b>-</b>	
_	SSEE FL 32301		La	con	Buildin		
			City	77 1 1/	260.1000	FL 473	70-02m
		- 11	registered office o	r registered a	gent, or both, in the State of Floric	da.	11 000
8. The above	named entity submits this statement fo	r the purpose of changing its	s registered office o				
8. The above	named entity submits this statement fo	r the purpose of changing its	registered office o	. , o g . o . o . o . o . o			1
8. The above	·				reinstating)	DATE	
SIGNATURE .	Signature, typed or printed name of registered agent a	and title if applicable. (NOT	E: Registered Agent signal	ure required when	reinstating)	DATE	
SIGNATURE	Signature, typed or printed name of registered agent a pration is eligible to satisfy its Intangible equirement and elects to do so.	and title if applicable. (NOT  FILE NOW!  After May 1, 20	E: Registered Agent signal III FEE IS \$150. 02 Fee will be \$5	ure required when	10. Election Campaign Finan Trust Fund Contribution.	noing\$5.0	O May Be
SIGNATURE .  9. This corpo Tax filing r (See criter	Signature, typed or printed name of registered agent or pration is eligible to satisfy its Intangible equirement and elects to do so.	FILE NOW! After May 1, 20 Make Check Payat	E: Registered Agent signal [!! FEE IS \$150. 02 Fee will be \$5 ble to Departmen	ure required when 00 550.00 t of State	10. Election Campaign Finan Trust Fund Contribution.	ncing \$5.0	to Fees
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Date

Daytime Phone #