04-21-2003 90435 019 \*\*\*150.00

## **FILED** Apr 21, 2003 8:00 am Secretary of State

**UUUUUIU**~

CHECK HERE IF MAKING CH	HANGES
4. FEI Number 74-6045664	Applied For
747043004	Not Applicable
	.75 Additional Required
7. Name and Address of New Registered Age	nt

- A LINDERON ARTON TERRON ELINGE ELINEN TRETTO LINUX REPORT DILONA DITORI ARRARA DITORI, DILONE TROPI

THOMAS, DAVE 4112 PINAR DR **BRADENTON FL 33507** 

DOCUMENT #

Principal Place of Business

2. Principal Place of Business

UNITED FIRE & INDEMNITY COMPANY

1. Entity Name

2115 WINNIE

P. O. BOX 1259

**GALVESTON TX 77550** 

Suite, Apt. #, etc.

City & State

Zip

Name	4			
Street Address (P.O. Box Nur	mber is Not Acceptab	e)		
City		EI	Zip Code	

Trust Fund Contribution.

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

Country

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

6. Name and Address of Current Registered Agent

2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

Mailing Address

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

118 SECOND AVE SE

CEDAR RAPIDS IA 52407

811199

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing **\$5.00** May Be

Added to Fees

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State

Country

- 1			
⇌	DITIONS TO LANGE TO OFFICERS AND DIDECTORS		4
U	DITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN	1

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPD SEINSHEIMER, J F III 2115 WINNIE GALVESTON TX 77550 CD	<b>X</b> Delete □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Director Seinsheimer, J.F.III 2115 Winnie Galveston TX 77550	X Change  ☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	MCINTYRE, JR, JOHN SCOTT 118 SECOND AVE SE CEDAR RAPIDS IA 52407		NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RIFE, JOHN ARTHUR 118 SECOND AVE SE CEDAR RAPIDS IA 52407	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Lohec, Helen K 7606 Beaudelaire Galveston TX 77551	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	DT BAKER, KENT G 118 SECOND AVENUE SE CEDAR RAPIDS IA 52407	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP SWAIN, RICHARD B 118 SECOND AVENUE SE CEDAR RAPIDS IA 52401	<b>K</b> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP Swain, Richard B 2115 Winnie Galveston, TX 77550	<b>X</b> ] Change	Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FIEGUIRED Kent G. Baker:

4-15-20035 10319-399-5879

Daytime Phone #