FILED 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)** 851719 DOCUMENT # 01-24-2003 90071 042 ***150.00 1. Entity Name UNITED AMERICAN INSURANCE COMPANY Principal Place of Business Mailing Address 3700 S STONEBRIDGE DR P O BOX 8080 PO BOX 810 PO BOX 810 MCKINNEY TX 75070 MCKINNEY TX 75070 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

Jan 24, 2003 8:00 am **Secretary of State**

Country 4. FEI Number 73-1128555 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required Street Address (P.O. Box Number is Not Acceptable) City City FL Zip Code City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code PACE PRegistered Agent signature required when reinscales) DATE 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITILE MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS																		
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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 appears, with all other like empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

Zip

SIGNATURE

10.

TITLE

NAME

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CITY-ST-7IP

Country

FLORIDA STATE INSURANCE COMMISSIONER

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

MONTGOMERY, ROSEMARY J

4111 PECAN ORCHARD

MCANDREW, MARK S

MC KINNEY TX 75070

GOCKEL, DOUGLAS

HUTCHISON, LARRY M

DUNCANVILLE TX 75137

1107 GREENHILL RD

ADAMS, JON A

6282 MC COMMAS

DALLAS TX 75214

COLEMAN, GARY L.

RICHARDSON TX 75082

2105 BRANDEIS

6915 GLENBROOK

DALLAS TX

5900 WATERVIEW

PARKER TX

PD

THE CAPITOL BUILDING TALLAHASSEE FL 32301

the obligations of registered agent.

6. Name and Address of Current Registered Agent

8. The above named entity submits this statement for the purpose of changing its

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

OFFICERS AND DIRECTORS

☐ Delete

☐ Delete

☐ Delete

☐ Delete

Delete

☐ Delete

Zip

ube required PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

☐ Change

☐ Addition