

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2004 8:00 am
Secretary of State

03-11-2004 90021 046 ***150.00

DOCUMENT # J74455

1. Entity Name
FLORIDA LAWYERS MUTUAL INSURANCE COMPANY



Principal Place of Business
**3504 LAKE LYNDA DR
STE 325
ORLANDO, FL 32817 US**

Mailing Address
**3504 LAKE LYNDA DR
STE 325
ORLANDO, FL 32817 US**

24013103



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02252004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

59-2810665

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **BRADDOCK, DONALD LAYTON**
STREET ADDRESS **10742 WAVERLEY BLUFF WAY**
CITY-ST-ZIP **JACKSONVILLE, FL 32223**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **CD** ☐ Delete
NAME **FERRERO, RAYMOND R JR**
STREET ADDRESS **707 S E 3RD AVE S 600**
CITY-ST-ZIP **FT. LAUDERDALE, FL 33316**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Delete
NAME **LAFACE, RONALD C**
STREET ADDRESS **101 E COLLEGE AVENUE**
CITY-ST-ZIP **TALLAHASSEE, FL 32301**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☐ Delete
NAME **LOUCKS, WILLIAM E**
STREET ADDRESS **444 SEABREEZE BLVD S 900**
CITY-ST-ZIP **DAYTONA BCH, FL 32118**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☐ Delete
NAME **DISQUE, PHILIP A**
STREET ADDRESS **707 SE 3RD AVENUE SUITE 400**
CITY-ST-ZIP **FT LAUDERDALE, FL 33316**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:

William E Loucks
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 2, 2004
Date

Daytime Phone #

ATTACHMENT - continued

24019105

2004 UNIFORM BUSINESS REPORT (UBR)

Florida Lawyers Mutual Insurance Company
Document # J74455

Title D
Name SONDAK, ROBERT M.
Address 9400 S. DADELAND BLVD., STE. 600
MIAMI, FL 33156

Title D
Name STAGG, C. LAWRENCE
Address 100 SOUTH ASHLEY DRIVE, STE. 1500
TAMPA, FL 33602

Title D
Name WILLIAMS, GARY
Address 227 S. CALHOUN STREET
TALLAHASSEE, FL 32301

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

Title D
Name KENNY, JAMES J.
1100 MIAMI CENTER
201 S. BISCAYNE BLVD.
MIAMI, FL 33131

DELETE

ATTACHMENT

241019105

2004 UNIFORM BUSINESS REPORT (UBR)

Florida Lawyers Mutual Insurance Company
Document # J74455

11. ADDITIONAL OFFICERS AND DIRECTORS

Title D
Name DOPPELT, AVA K.
Address 255 SOUTH ORANGE AVE., STE. 1401
ORLANDO, FL 32802

Title D
Name GIBBS, CRAIG
Address 1200 RIVERPLACE BLVD., STE. 810
JACKSONVILLE, FL 32207

Title D
Name GOODLETTE, J. DUDLEY
Address 4001 TAMiami TRAIL N., STE. 300
NAPLES, FL 33940

Title D
Name HARKNESS, JOHN F.
Address 650 APALACHEE PARKWAY
TALLAHASSEE, FL 32399-2300

Title D
Name LARRY, DENNIS K.
Address 125 W. ROMANA
ONE PENSACOLA PLAZA, STE. 800
PENSACOLA, FL 32501

Title D
Name LYTAL, LAKE JR.
Address 515 N. FLAGLER DRIVE, STE. 1000
WEST PALM BEACH, FL 33401

Title D
Name RAPPENECKER, STEPHEN A.
Address STE. C, MERIDIEN CENTRE
2700 N.W. 43RD STREET
GAINESVILLE, FL 32606