

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2005 8:00 am
Secretary of State

01-14-2005 90006 048 ***150.00

DOCUMENT # K39194	
1. Entity Name SEVEN SEAS INSURANCE COMPANY, INC.	

Principal Place of Business 821 AVENUE E RIVIERA BEACH, FL 33404-7523	Mailing Address 821 AVENUE E RIVIERA BEACH, FL 33404-7523
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50002502



2. Principal Place of Business 4 East Port Rd.	3. Mailing Address 4 East Port Rd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

01042005 Chg-P CR2E034 (10/03)

City & State Riviera Beach, FL	City & State Riviera Beach, FL
Zip 33404-6902	Country USA

4. FEI Number 65-0115930	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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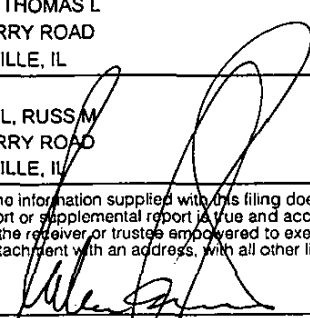
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEHRENS, GEORGE M 1844 FERRY RD NAPERVILLE, IL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HALLORAN, KATHLEEN L 1844 FERRY ROAD NAPERVILLE, IL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MURRELL, RICK 821 AVENUE "E" RIVIERA BEACH, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BIRDSALL, JOHN H., III 821 AVENUE "E" RIVIERA BEACH, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC FISHER, THOMAS L 1844 FERRY ROAD NAPERVILLE, IL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STROBEL, RUSS M 1844 FERRY ROAD NAPERVILLE, IL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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:  _____
Ruben Spinrad, Assistant Secretary Date _____ Daytime Phone # 561-840-2853