

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2001 8:00 am
Secretary of State

03-22-2001 90001 047 ****61.25

DOCUMENT # N93000001670

1. Entity Name
GROUP UNDERWRITERS ASSOCIATION OF AMERICA, INC.

Principal Place of Business 1 INDEPENDENT DR SUITE 2600 JACKSONVILLE FL 32202 US	Mailing Address 1 INDEPENDENT DR SUITE 2600 JACKSONVILLE FL 32202 US
---	---

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
---	---

City & State	City & State	4. FEI Number 59-3178990	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
**LEAS, MICHAEL R
 1 INDEPENDENT DR
 STE 2600
 JACKSONVILLE FL 32202**

7. Name and Address of New Registered Agent
 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.

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

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MITCHELL, DAVID 178 MIDDLE STREET, SUITE 200 PORTLAND ME 04101	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HEBERLING, MARITA 9 PIEDMONT CNTR 3495 PIEDMONT RD NE. ATLANTA GA 33305	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GRITTON, KAREN 800 SILVERLAKE BLVD. DOVER DE 19904	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ROBINSON, TERESA 400 WESTWOOD DR WAUSAU WI 54402	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUSSELL, DON 500 SOUTHBOROUGH DR S. PORTLAND ME 04106	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PALMIERI, JOHN 440 LINCOLN ST WORCHESTER MA 01653	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Teresa Robison 14610 Middleburg Plain City Road Plain City, Ohio 43064	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD1? Don Russell 178 Middle Street, Suite 200 Portland, ME 04101	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO John Palmieri 8505 East Orchard Road Englewood, CO 80111	<input checked="" type="checkbox"/> Change <input type="checkbox"/> 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 617, 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: *SIGNATURE REQUIRED*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-01

Date Daytime Phone #

CR2E037 (10/00)

#N93000001670
782201

GROUP UNDERWRITERS ASSOCIATION OF AMERICA, INC.
2001 Nonprofit Corporation Annual Report

Continuation of Block 11

Block 11 (Additions/Changes):

D (ADDITION)
WALKER, Mark
4322 Matthew Court
Eagan, MN 55123

D (ADDITION)
JACOBSEN, Nichol
8529 Jeffrey Avenue South
Cottage Grove, MN 55016

D (ADDITION)
Wayne Fisher
6200 Shingle Creek Parkway
Suite 550
Brooklyn Center, MN 55430

D (ADDITION)
Linda Michelic
400 Field Drive
Lake Forest, IL 60045