

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000031709

Entity Name: URBAN INSURANCE, INC.

FILED  
Jan 05, 2004  
Secretary of State

**Current Principal Place of Business:**

4311 FAIRCOURT DR.  
VALRICO, FL 33594

**New Principal Place of Business:**

**Current Mailing Address:**

4311 FAIRCOURT DR.  
VALRICO, FL 33594

**New Mailing Address:**

FEI Number: 59-3708224

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DOWD, JEFFREY A P.A.  
550 NORTH REO STREET  
STE 302  
TAMPA, FL 33609 US

**Name and Address of New Registered Agent:**

DOWD, JEFFREY A P.A.  
3016 US HWY 301 NORTH  
SUITE 900  
TAMPA, FL 33619 US

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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/05/2004

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: URBAN, ROBERT  
Address: 4311 FAIRCOURT DR.  
City-St-Zip: VALRICO, FL 33594

Title: VD ( ) Delete  
Name: URBAN, DALE R  
Address: 4311 FAIRCOURT DR.  
City-St-Zip: VALRICO, FL 33594

Title: STD ( ) Delete  
Name: URBAN, SUZANNE  
Address: 4311 FAIRCOURT DR.  
City-St-Zip: VALRICO, FL 33594

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DALE URBAN

Electronic Signature of Signing Officer or Director

VP

01/05/2004

Date