

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

10090352

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                 |                                                                                                                                         |                                                                              |
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| <b>DOCUMENT # P37242</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                 |                                                                                                                                         |                                                                              |
| <b>1. Entity Name</b><br>TAPCO UNDERWRITERS, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                 |                                                                                                                                         |                                                                              |
| <b>Principal Place of Business</b><br>3035 S. CHURCH ST.<br>BURLINGTON, NC 27216                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                 | <b>Mailing Address</b><br>3035 S. CHURCH ST.<br>BURLINGTON, NC 27216                                                                    |                                                                              |
| <b>2. Principal Place of Business</b><br>3060 S. CHURCH ST.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                 | <b>3. Mailing Address</b><br>PO BOX 286                                                                                                 |                                                                              |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                 | Suite, Apt. #, etc.                                                                                                                     |                                                                              |
| <b>City &amp; State</b><br>BURLINGTON, NC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 | <b>City &amp; State</b><br>BURLINGTON, NC                                                                                               |                                                                              |
| <b>Zip</b><br>27215                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                 | <b>Zip</b><br>27216                                                                                                                     |                                                                              |
| <b>Country</b><br>USA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                 | <b>Country</b><br>USA                                                                                                                   |                                                                              |
| <b>4. FEI Number</b><br>56-1363658                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                 | <b>Applied For</b><br><input type="checkbox"/> Not Applicable                                                                           |                                                                              |
| <b>5. Certificate of Status Desired</b><br><input type="checkbox"/> \$8.75 Additional Fee Required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                 | <input checked="" type="checkbox"/> CHECK HERE IF MAKING CHANGES                                                                        |                                                                              |
| <b>6. Name and Address of Current Registered Agent</b><br>C T CORPORATION SYSTEM<br>1200 SOUTH PINE ISLAND ROAD<br>PLANTATION, FL 33324                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 | <b>7. Name and Address of New Registered Agent</b><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br>FL Zip Code |                                                                              |
| <b>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.</b>                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 |                                                                                                                                         |                                                                              |
| <b>SIGNATURE</b><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                 |                                                                                                                                         |                                                                              |
| <b>FILE NOW!!! FEE IS: \$150.00</b><br>After May 1, 2003 Fee will be \$550.00<br>Make Check Payable to Florida Department of State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                 | <b>9. Election Campaign Financing</b><br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees                  |                                                                              |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                 | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                                                                            |                                                                              |
| <b>TITLE</b><br>PD<br><b>NAME</b><br>JOHNSON, TAPLEY O III<br><b>STREET ADDRESS</b><br>3036 SOUTH CHURCH STREET<br><b>CITY-ST-ZIP</b><br>BURLINGTON, NC 27216                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete | <b>TITLE</b><br>3060 S. CHURCH ST.<br><b>NAME</b><br>BURLINGTON, NC 27215<br><b>STREET ADDRESS</b><br>CITY-ST-ZIP                       | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br>ST<br><b>NAME</b><br>JOHNSON, JEAN W<br><b>STREET ADDRESS</b><br>3036 S. CHURCH ST.<br><b>CITY-ST-ZIP</b><br>BURLINGTON, NC 27216                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Delete | <b>TITLE</b><br>3060 S. CHURCH ST.<br><b>NAME</b><br>BURLINGTON, NC 27215<br><b>STREET ADDRESS</b><br>CITY-ST-ZIP                       | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br>C<br><b>NAME</b><br>JOHNSON, TAPLEY O JR<br><b>STREET ADDRESS</b><br>3036 S. CHURCH ST.<br><b>CITY-ST-ZIP</b><br>BURLINGTON, NC 27216                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> Delete | <b>TITLE</b><br>3060 S. CHURCH ST.<br><b>NAME</b><br>BURLINGTON, NC 27215<br><b>STREET ADDRESS</b><br>CITY-ST-ZIP                       | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete | <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete | <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete | <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 507, 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.</b> |                                 |                                                                                                                                         |                                                                              |
| <b>SIGNATURE:</b> Tapley O. Johnson <b>4/9/03</b> 334-5579                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                 |                                                                                                                                         |                                                                              |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                 |                                                                                                                                         |                                                                              |

CR2E034 (10/02)