2005 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an atta

SIGNATURE:

Secretary of State DOCUMENT # P94000053936 03-23-2005 90025 037 ***158.75 1. Entity Name STATEWIDE PREMIUM FINANCE, INC. Principal Place of Business Mailing Address 2393 S CONGRESS AVE PO BOX 5417 WEST PALM BEACH, FL 33406 LAKE WORTH, FL 33466-5417 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02102005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-0516148 Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent Name FINKELSTEIN, MYRON H 2393 S CONGRESS AVE Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH, FL 33406 City 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ÐΠ ☐ Delete TITLE Addition ☐ Change FINKELSTEIN, MYRON H NAME NAME STREET ADDRESS 10391 STONEBRIDGE BLVD. STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33498 CITY-ST-ZIP SD TITLE Delete TITLE Addition Change MURSTEIN, PAUL C Manning, Dane 1524 Hidden Lane NAME NAME STREET ADDRESS 250 PARK AVENUE, SUITE 2030 STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10017 CITY-ST-ZIP CD TITLE ☐ Delete TITLE Change ☐ Addition NAME SEAMAN, CARL STREET ADDRESS 250 PARK AVENUE, SUITE 2030 STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10017 CITY-ST-ZIP TITLE TV ☐ Defete IIILE ナマミ Change ☐ Addition NAME BLAKE, JAMES W NAME STREET ADDRESS 2358 SUNDERLAND AVENUE STREET ADDRESS CITY-ST-ZIP WELLINGTON, FL 33414 CITY-ST-ZIP TITLE ☐ Delete TALE Change Addition PRENDAMANO, JOSEPH G NAME NAME STREET ADDRESS 313 LAKE CIRCLE #316 STREET ADDRESS CITY-ST-7/P NORTH PALM BEACH, FL 33408 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-7IP 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 title 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

like empowered.

SIGNING OFFICER OR DIRECTOR

FILED

Mar 23, 2005 8:00 am