

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90098 006 ***150.00

DOCUMENT # P97000071536

1. Entity Name
AMERICAN STRATEGIC INSURANCE CORP.

Principal Place of Business 1325 SNELL ISLE BLVD SUITE 211 ST PETERSBURG FL 33704 US	Mailing Address 1325 SNELL ISLE BLVD SUITE 211 ST PETERSBURG FL 33704 US
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C0039496



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3459912**

Applied For
 Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MEENAN, TIMOTHY J
204 SOUTH MONROE STREET
TALLAHASSEE FL 32301

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 _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	CS	FASTEAU, MARC	151 WEST 86TH STREET NEW YORK NY 10024	<input type="checkbox"/>	<input type="checkbox"/>
	D	NASON, ROBERT	45 REID STREET HAMILTON BE 07728	<input type="checkbox"/>	<input type="checkbox"/>
	D	CLEMENTS, JOHN	20 HORSENECK LANE GREENWICH CT 06830	<input type="checkbox"/>	<input type="checkbox"/>
	D	KING, JOSEPH	20 HORSENECK LANE GREENWICH CT 06830	<input type="checkbox"/>	<input type="checkbox"/>
	DPT	AUER, JOHN F	4801 LANSING ST N.E. ST PETERSBURG FL 33703	<input type="checkbox"/>	<input type="checkbox"/>
	D	CONNELL, KENNETH BRUCE	18 QUEEN STREET HAMILTON BE	<input type="checkbox"/>	<input type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/01

Date

727-821-8765

Daytime Phone #

US 136

CR2E034 (10/00)