2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000068992

Entity Name: THE INSURANCE CONSULTING GROUP, INC.

FILED Apr 22, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: C/O JOSEPH TRANQUILLO C/O JOSEPH TRANQUILLO 409 WESTBOROUGH LN 1452 GROVE CIRCLE CT. SAFETY HARBOR, FL 34695 CLEARWATER, FL 33755 **Current Mailing Address:** New Mailing Address: C/O JOSEPH TRANQUILLO C/O MITCH BRAUN 1452 GROVE CIRCLE CT. 409 WESTBOROUGH LN CLEARWATER, FL 33755 SAFETY HARBOR, FL 34695 FEI Number: 59-3526240 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRAUN, MITCHELL V 1452 GROVE CIRCLE COURT CLEARWATER, FL 33755 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 Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition TRANQUILLO, JOSEPH TRANQUILLO, JOSEPH Name: Name: 409 WESTBOROUGH LN. Address: 1452 GROVE CIRCLE CT. Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: CLEARWATER, FL 33755

 Title:
 D () Delete

 Name:
 BRAUN, MITCHELL V

 Address:
 1452 GROVE CIRCLE COURT

 City-St-Zip:
 CLEARWATER, FL 33755

Title: () Change () Addition

Name: Address: Citv-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: MITCHELL V. BRAUN D 04/22/2002