2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003
Secretary of State

DOCUMENT# S60572

Entity Name: DENNIS INSURANCE AGENCY, INC.

Current Principal Place of Business:

19209 NORTH HIGHWAY 41
LUTZ, FL 33549 US

New Principal Place of Business:

Current Mailing Address:

19209 NORTH HIGHWAY 41
LUTZ, FL 33549 US

New Mailing Address:

FEI Number: 59-3453285 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TRASK, J. THOMAS
19209 NORTH HIGHWAY 41
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: TRASK, THOMAS
Address: 19209 N HWY 41
City-St-Zip: LUTZ, FL 33549

Title: VP ( ) Delete
Name: TRASK, MELANIE
Address: 19209 N HWY 41
City-St-Zip: LUTZ, FL 33549

Title: D ( ) Delete
Name: TRASK, DENNIS
Address: 19209 N HWY 41
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: TRASK, J. THOMAS
Address: 19209 N HWY 41
City-St-Zip: LUTZ, FL 33549

Title: S (X) Change ( ) Addition
Name: TRASK, MELANIE B
Address: 19209 N HWY 41
City-St-Zip: LUTZ, FL 33549

Title: VP (X) Change ( ) Addition
Name: TRASK, DENNIS W
Address: 19209 N HWY 41
City-St-Zip: LUTZ, FL 33549

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: J. THOMAS TRASK P 02/17/2003

Electronic Signature of Signing Officer or Director Date