

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 802142 (0)

1. Corporation Name

UNIGARD SECURITY INSURANCE COMPANY



Principal Place of Business

1215 FOURTH AVE.
SEATTLE WASHINGTON 98161-8096

Mailing Address

1215 FOURTH AVENUE
SUITE 1800
SEATTLE WASHINGTON 98161-8096
US

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

04/01/1925

3a. Date of Last Report

02/08/1995

4. FEI Number

91-0341780

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes

No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

FISHER, JOHN E., ESQ.
ATLANTIC BANK BLDG. SUITE 1500
20 N. ORANGE AVE.
ORLANDO FL 32802

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person filing this statement with the corporation

Signature of Registered Agent (if not same person as filing)

DATE

12. OFFICERS AND DIRECTORS

1. NAME

PD
SWEENEY, PAUL L.
3 FAIR OAKS
NEWTON MA 02160

DELETE

2. NAME

VD
MALONEY, THOMAS
464 MARSHALL ST.
HOLLISTON MA 21746

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SIGNATURE: Pamela S. Sellers-Hoelsken

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pamela S. Sellers-Hoelsken

1/16/96

206-292-4454

CR2E034 (12/95)