

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000047036

1. Entity Name

BRIDGEFIELD EMPLOYERS INSURANCE COMPANY

**FILED**  
**May 17, 2000 8:00 am**  
**Secretary of State**

05-17-2000 90863 030 \*\*\*150.00

Principal Place of Business

Mailing Address

2310 A-Z PARK RD  
LAKELAND FL 33801

2310 A-Z PARK RD  
LAKELAND FL 33801-6880

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1835212

Applied For

Not Applicable

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

INSURANCE COMMISSIONER  
THE CAPITOL  
TALLAHASSEE FL

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

Signature, typed or printed name of registered agent and title if applicable.

(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, 2000 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 PD ☒ Delete  
NAME BULL, WILLIAM B  
STREET ADDRESS 4524 NUNNSWOOD LANE  
CITY-ST-ZIP LAKELAND FL 33813

TITLE VT ☐ Change ☒ Addition  
NAME John D. Hanselman  
STREET ADDRESS 2310 A-Z Park Road  
CITY-ST-ZIP Lakeland, FL 33801

TITLE D ☐ Delete  
NAME LANGWELL, DENNIS J  
STREET ADDRESS 175 BERKELEY RD  
CITY-ST-ZIP BOSTON MA 02117

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME LONG, DAVID H  
STREET ADDRESS 175 BERKLEY RD  
CITY-ST-ZIP BOSTON MA 02117

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Delete  
NAME MARZIANO, FREDRIC G  
STREET ADDRESS 175 BERKLEY RD  
CITY-ST-ZIP BOSTON MA 02117

TITLE D ☐ Change ☒ Addition  
NAME Roger L. Jean  
STREET ADDRESS 175 Berkley Street  
CITY-ST-ZIP Boston, MA 02117

TITLE D ☐ Delete  
NAME SWEENEY, TIMOTHY  
STREET ADDRESS 175 BERKLEY RD  
CITY-ST-ZIP BOSTON MA 02117

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V ☐ Delete  
NAME HODGES, RICKY T  
STREET ADDRESS 2310 A-Z PK RD  
CITY-ST-ZIP LAKELAND FL 33801

TITLE PD ☒ Change ☐ Addition  
NAME Ricky T. Hodges  
STREET ADDRESS 2310 A-Z Park Road  
CITY-ST-ZIP Lakeland, FL 33801

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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

Ricky T. Hodges, President 4-25-00 863-665-6060

Date

Daytime Phone #

CR2E034 (9/99)

DW52139

CONTINUATION: P97000047036

BRIDGEFIELD EMPLOYERS INSURANCE COMPANY

VT

Delete

Russell L. Wall  
2310 A-Z Park Road  
Lakeland, FL 33801

V

Delete

David T. Cederholm  
2310 A-Z Park Road  
Lakeland, FL 33801

S

Thomas L. Clarke, Jr.  
2310 A-Z Park Road  
Lakeland, FL 33801