2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 8:00 am
Secretary of State
01-29-2001 90121 034 ****20.00
03-01-2001 91340 028 ***130.00

DOCUMENT # 855601

1. Entity Name
UNDERWRITERS INSURANCE COMPANY

D0021223

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
200 CORPORATE POINTE #300 CULVER CITY CA 90230 US	P O BOX 3649 CULVER CITY CA 90231-3649 US

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 56-0997453 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THE INSURANCE COMMISSIONER
THE CAPITOL BLDG
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

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, 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	D KOLAKOWSKI, STEPHEN C 22801 VENTURA BLVD., #300 WOODLAND HILLS CA	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Kolakowski, Stephen C. 26050 Mureau Road Calabasas, CA 91302	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PETRU, HARRY JR 100 CORPORATE POINTE #300 CULVER CITY CA 90230	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Bolitro, Robert M. 650 Elm Street, 6th Floor Manchester, NH 03101	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARRETT, FRANK J 22801 VENTURA BLVD., #300 WOODLAND HILLS CA 91364	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D de Haaff, Stuart M. 26050 Mureau Road Calabasas, CA 91302	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C NEWMAN, STEVEN H 22801 VENTURA BLVD., #300 WOODLAND HILLS CA	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D John, Russell T. 26050 Mureau Road Calabasas, CA 91302	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V KRANTZ, JAMES A 26050 MUREAU RD CALABASAS CA 91302	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/00)

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: _____ 1/10/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #