

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P24431

FILED
Jan 16, 2002 8:00 AM
Secretary of State

Entity Name: NATIONAL MARINE UNDERWRITERS, INC.

Current Principal Place of Business:

410 SEVERN AVENUE
SUITE 207
ANNAPOLIS, MD 21403

New Principal Place of Business:

Current Mailing Address:

410 SEVERN AVENUE
SUITE 207
ANNAPOLIS, MD 21403

New Mailing Address:

FEI Number: 52-1337983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDONALD, DAVID
MCDONALD & MCDONALD
1393 S.W. FIRST STREET, SUITE 200
MIAMI, FL 33135 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

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:

Title: PD () Delete
Name: BEACHLEY, FRANK,
Address: 208 LIGHTHOUSE VIEW DR
City-St-Zip: STEVENSONVILLE, MD

Title: VP () Delete
Name: ROBINSON, ROBERT,
Address: P.O. BOX 528
City-St-Zip: FAIRFIELD, PA

Title: SD () Delete
Name: INGLIS, JAY,
Address: 28 WILLOW
City-St-Zip: BROOKLYN HEIGHTS, NY

Title: T () Delete
Name: RICE, ERIN
Address: 23 A UPSHUR AVE
City-St-Zip: ANNAPOLIS, MD 21403

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BEACHLEY, FRANK,
Address: 208 LIGHTHOUSE VIEW DR
City-St-Zip: STEVENSONVILLE, MD 21666

Title: VP (X) Change () Addition
Name: ROBINSON, ROBERT,
Address: P.O. BOX 528
City-St-Zip: FAIRFIELD, PA 17320

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-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: ERIN RICE

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01/16/2002

Electronic Signature of Signing Officer or Director

Date