

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

7/31

FILED
Aug 29, 2003 8:00 am
Secretary of State

07-30-2003 90068 037 ***550.00

DOCUMENT # P02000002018

1. Entity Name
SILVER INSURANCE & FINANCIAL GROUP, INC.



Principal Place of Business
**2200 WINTER SPRINGS BLVD.
SUITE 114
OVIEDO FL 32765**

Mailing Address
**2200 WINTER SPRINGS BLVD.
SUITE 114
OVIEDO FL 32765**

55055341



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

02-0546174

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**TAYCO ENTERPRISES, INC.
8406 PCB PRKWAY
SUITE L
PANAMA CITY BEACH FL 32407**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
SILVER, TOBBY
2200 WINTER SPRINGS BLVD SUITE 114
OVIEDO FL 32765** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
SILVER, RODNEY E
4826 LONGWATER WAY
TAMPA FL 33615** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**RODNEY E. SILVER
1057 SURREYWOOD CIRCLE
HEATHROW, FL. 32746-1702** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
SILVER, DONNA M
2809 TRENTON LANE
OVIEDO FL 32765** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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☐ Delete

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CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

RODNEY E. SILVER

7/14/03

(807) 559 1009

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)