2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # 209713** Apr 28, 2000 8:00 am Secretary of State 1. Entity Name SOUTHLAND INSURANCE AGENCY INC 04-28-2000 90061 003 ***150.00 Principal Place of Business Mailing Address 618 ANDERSON CIRCLE 618 ANDERSON CIRCLE SUITE 108 **SUITE 108** DEERFIELD BEACH FL 33441-7749 DEERFIELD BEACH FL 33441-7749 2. Principal Place of Business 3. Mailing Address 1242 NW 51st Street 1242 NW 51st Street DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-0836163 Not Applicable Deerfield Beach Deerfield Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 33442 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Allen M. Potter POTTER, ALLEN M Street Address (P.O. Box Number is Not Acceptable) 618 ANDERSON CIRCLE, #108 1242 N.W. 51 Street DEERFIELD BEACH FL 33441-7749 Zip Code CitDeerfield Beach 33442-091 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. 4/20/2000 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition TITLE ☐ Delete TITLE POTTER, ALLEN M NAME NAME STREET ADDRESS 1242 NW 51st Street 618 ANDERSON CIRCLE #108 STREET ADDRESS Deerfield Beach FL 33442-0917 CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL 33441-7749 ☐ Addition **x** Change ☐ Delete TITLE TITLE POTTER, MARJORIE L NAME 618 ANDERSON CIRCLE, #108 STREET ADDRESS 1242 NW 51 Street STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL 33441-7749 Deerfield Beach FL 33442-0917 CITY-ST-7/P ☐ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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 of the corporation or the receiver or trustee changed, or on an attachment with ap addr

SIGNATURE:

480-2990