

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 470606

1. Entity Name

XYZ INSURANCE, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90164 044 ***150.00

Principal Place of Business

Mailing Address

LEGAL DEPT. 9TH FLOOR
2601 S BAYSHORE DR
MIAMI FL 33133-2461

LEGAL DEPT. 9TH FLOOR
2601 S BAYSHORE DR
MIAMI FL 33133-5417

2. Principal Place of Business

4800 N. Federal Highway

3. Mailing Address

200 S. Biscayne Boulevard

Suite, Apt. #, etc.
Suite 105E

Suite, Apt. #, etc.
Suite 4900

City & State

Boca Raton, FL

City & State

Miami, FL

4. FEI Number

59-1640724

Applied For

Not Applicable

Zip

33431

Country

Zip

33131

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

GOLDMAN, JOEL K
2601 S BAYSHORE DR
9TH FLOOR
MIAMI FL 33133

Name K. Lawrence Gragg

Street Address (P.O. Box Number is Not Acceptable)

200 S. Biscayne Blvd., Suite 4900

City

Miami

FL

Zip Code
33131

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 DP ☒ Delete
NAME JEFFREY, THOMAS W
STREET ADDRESS 2601 S. BAYSHORE DRIVE
CITY-ST-ZIP MIAMI FL

TITLE P/D ☐ Change ☒ Addition
NAME Ackerman, Richard S.
STREET ADDRESS 4800 N. Federal Highway, Suite 105E
CITY-ST-ZIP Boca Raton, FL 33431

TITLE AS ☒ Delete
NAME COOK, PAULA
STREET ADDRESS 2601 S. BAYSHORE DRIVE
CITY-ST-ZIP MIAMI FL 33133

TITLE V ☐ Change ☒ Addition
NAME Gitlin, Gene
STREET ADDRESS 4800 N. Federal Highway, Suite 105E
CITY-ST-ZIP Boca Raton, FL 33431

TITLE VT ☒ Delete
NAME FISCHER, JOHN H
STREET ADDRESS 2601 S. BAYSHORE DRIVE
CITY-ST-ZIP MIAMI FL

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

TITLE VSD ☒ Delete
NAME GOLDMAN, JOEL K
STREET ADDRESS 2601 S. BAYSHORE DRIVE
CITY-ST-ZIP MIAMI FL

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

TITLE VCD ☒ Delete
NAME COOK, PAULA
STREET ADDRESS 2601 S. BAYSHORE DR.
CITY-ST-ZIP MIAMI FL 33133

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

TITLE V ☒ Delete
NAME LAGUARDIA, JOHN
STREET ADDRESS 2601 S. BAYSHORE DR.
CITY-ST-ZIP MIAMI FL 33133

TITLE ☐ Change ☐ Addition
NAME
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 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

Richard S. Ackerman 4/30/00 561-395-9666

Date

Daytime Phone #

CR2E034 (9/99)