

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90039 014 ***158.75

DOCUMENT # 555462

1. Entity Name

SERVICE INSURANCE COMPANY

Principal Place of Business

**1401 8TH AVE WEST
 BRADENTON FL 34205
 US**

Mailing Address

**P.O. BOX 9729
 BRADENTON FL 34206-9729
 US**

2. Principal Place of Business

4730 SR 64 EAST

3. Mailing Address

Suite, Apt. #, etc.

City & State

BRADENTON, FL

City & State

4. FEI Number

59-1786118

Applied For

Not Applicable

Zip

34208

Country

USA

Zip

Country

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**CRUIKSHANK, DAVID C
 1401 8TH AVE WEST
 BRADENTON FL 34205**

7. Name and Address of New Registered Agent

Name

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

4730 SR 64 EAST

City

BRADENTON

FL

Zip Code

34208

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, 2002 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

TITLE **CD** ☐ Delete
 NAME **WEICHEL, JOHN A SR.**
 STREET ADDRESS **4401 RIVERVIEW BLVD. W.**
 CITY-ST-ZIP **BRADENTON FL 34209**

TITLE **PD** ☐ Delete
 NAME **CRUIKSHANK, DAVID C**
 STREET ADDRESS **4716 18TH AVE., W.**
 CITY-ST-ZIP **BRADENTON FL 34209**

TITLE **V** ☐ Delete
 NAME **MATRAS-HAMBY, ANN**
 STREET ADDRESS **7403 ALDERWOOD DRIVE**
 CITY-ST-ZIP **SARASOTA FL 34243**

TITLE **S** ☐ Delete
 NAME **WAAG, ROSETTA**
 STREET ADDRESS **5928 DORAL DRIVE**
 CITY-ST-ZIP **SARASOTA FL 34243**

TITLE **D** ☐ Delete
 NAME **STRICKLAND, ROBERT W**
 STREET ADDRESS **P.O. BOX 8010**
 CITY-ST-ZIP **GOLDSBORO NC 27533**

TITLE **V** ☐ Delete
 NAME **GURLEY, MICHAEL A**
 STREET ADDRESS **206 73RD ST., NW**
 CITY-ST-ZIP **BRADENTON FL 34209**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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 CITY-ST-ZIP

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NAME
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 CITY-ST-ZIP

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROSETTA WAAG, CORPORATE SECRETARY

1-800-780-8423 Ext. 102

Date

Daytime Phone #

CR2E034 (9/01)