2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 558943

Entity Name: MARCUS INSURANCE AGENCY, INC.

FILED Jan 20, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2863 W BROWARD BLVD. FORT LAUDERDALE, FL 33312

Current Mailing Address: New Mailing Address:

2863 W BROWARD BLVD. FORT LAUDERDALE, FL 33312

FEI Number: 59-1805406 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARCUS, CRAIG ARTHUR
2863 W. BROWARD BLVD.
FT. LAUDERDALE, FL 33312

MARCUS, JOANNE D PVTS
2863 W. BROWARD BLVD.
FT. LAUDERDALE, FL 33312

FT. LAUDERDALE, FL 33312

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: JOANNE D MARCUS 01/20/2002

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PVTS (X) Change () Addition Name: MARCUS, CRAIG ARTHUR, Name: MARCUS, JOANNE D, Address: 2863 W. BROWARD BLVD. Address: 2863 W. BROWARD BLVD.

Address: 2863 W. BROWARD BLVD. Address: 2863 W. BROWARD BLVD. City-St-Zip: FT. LAUDERDALE, FL City-St-Zip: FT. LAUDERDALE, FL

 Title:
 VDS
 (X) Delete
 Title:
 () Change () Addition

 Name:
 MARCUS, JOANNE,
 Name:

 Address:
 2863 W. BROWARD BLVD.
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL
 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: JOANNE D MARCUS PVTS 01/20/2002