	2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 658743				FILED Mar 31, 2003 8:00 am Secretary of State	
1. Entity Name PROGRESSIVE SOUTHEASTERN INSURANCE COMPANY					03-31-2003 90207 036 ***150.00	
Principal Place of Business 4030 CRESCENT PARK DRIVE BUILDING B		Mailing Address 6300 WILSON MILLS RD W33				
RIVERVIEW FL 33569 US		MAYFIELD VILLAGE OH 44143 US				
Principal Place of Busir	less	3. Mailing Address			T TERRITE BITARI UNITE ANTAL AREA ALLA DIDITOTALI DIDITALI DI ALLA DIDITI AREA.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			C CHECK HERE IF MAKING CHANGES	
City & State		City & State			4. FEI Number 59-1951700 Applied For	
Zip .	Country	Zip	Country		5. Certificate of Status Desired Status Additional	
6. Name	and Address of Current Reg	istered Agent			7. Name and Address of New Registered Agent	
	······•			tor of	- Office of Insurance fegulation	
NSURANCE COMMIS 200 EAST GAINES S			2 Stree	t Address	EO, Box Number is Not Acceptable)	
ARSON BULIDING		600	Cust	camiles silled		
ALLAHASSEE FL 32	599-0300		Cit <u>y</u>		EI Zio Code	
The above named entity	submits this statement for the	purpose of changing its		allaha	に分子でし、アレートスクラクターのタンム ed agent, or both, in the State of Florida. I am familiar with, and accept	
the obligations of regist		polyboo of ondinging it	o registered emot	or registere		
GNATURE	·		<u></u>			
	or printed name of registered agent and the	the if applicable. (NOT	TE: Registered Agent sig	nature required	when reinstating) DATE	
After May 1, 200	FEE IS \$150.00 3 Fee will be \$550.00 Florida Department of Sta				9. Election Campaign Financing Trust Fund Contribution.	
E P	OFFICERS AND DIR		11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
AE DOMECK, EET ADDRESS 625 ALPH		Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s PD	Change Addition	
E AS		Delete	TITLE		🛄 Change 🔛 Addition	
ET ADDRESS 300 N COI	NTHLEEN M MMONS BLVD VILLAGE_OH_44143-2182		NAME STREET ADDRES CITY-ST-ZIP	s		
E CD			TITLE	Ð	X Change Addition	
E RENWICK,	glenn m On mills rd.		NAME STREET ADDRES	s		
	VILLAGE OH 44143-2182		CITY-ST-ZIP			
ATVP KUSMER		🗖 Delete	TITLE		Change 🔲 Addition	
in ordinary of	IAMES L ON MILLS RD.		NAME STREET ADDRES	s		
	VILLAGE OH 44143-2182		CITY-ST-ZIP			
	/. DANE A	🗖 Delete	TITLE NAME	SVP	. Change 🗌 Addition	
•	MONS BLVD		STREET ADDRES	s		
E SHRALLOV			CITY-ST-ZIP TITLE	100	K Change 🔲 Addition	
EE SHRALLOV SET ADDRESS 300 N COM S-ST-ZIP MAYFIELD	VILLAGE OH 44143-2182	Dalata	I IILL	VPP		
E SHRALLOV ET ADDRESS 300 N COI -ST-ZIP MAYFIELD E VP E BASCH, JE		Delete	NAME STREET ADDRES	s		
E SHRALLOV ET ADDRESS -ST-ZIP MAYFIELD E VP E BASCH, JE 6300 WILS MAYFIELD	FFREY W DN MILLS RD. VILLAGE OH 44143-2182		STREET ADDRES CITY - ST - ZIP		ction 119.07(3)(i), Florida Statutes. I further certify that the information ame legal effect as if made under oath; that I am an officer or director Florida Statutes; and that my name appears in Block 10 or Block 11 if	