2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 691808

Entity Name: BILL ARFLIN BONDING AGENCY, INC.

FILED Apr 30, 2002 8:00 AM Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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303 NORTH LIBERTY STREET

JACKSONVILLE, FL 32202

411 EAST MONROE STREET

SUITE 101

JACKSONVILLE, FL 32202

Current Mailing Address: New Mailing Address:

303 NORTH LIBERTY STREET

JACKSONVILLE, FL 32202

411 EAST MONROE STREET

SUITE 101

JACKSONVILLE, FL 32202

FEI Number: 59-2096232 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:

TASSONE, FRANK JR. 1833 ATLANTIC BLVD. JACKSONVILLE, FL

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:

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:

() Change () Addition

Title: STMD () Delete Title: STMD (X) Change () Addition Name: LESAGE, TRACEY F LESAGE, TRACEY F

Address: 303 N. LIBERTY ST. Address: 411 EAST MONROE STREET SUITE 101

City-St-Zip: JACKSONVILLE, FL 32202

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

Name: LOWERY, VONCILE N

Address: 303 N LIBERTY ST Address: 411 EAST MONROE STREET SUITE 101
City-St-Zip: JACKSONVILLE, FL 32202
City-St-Zip: JACKSONVILLE, FL 32202

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Title: VP () Delete Title: VP (X) Change () Addition Name: SCOTT, CLINTON Name: SCOTT, CLINTON F

Address: 303 NORTH LIBERTY STREET Address: 411 EAST MONROE STREET SUITE 101

City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32202

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

Name: ARFLIN, TRACY Name: ARFLIN, TRACY

Address: 303 NORTH LIBERTY STREET Address: 411 EAST MONROE STREET SUITE 101

 City-St-Zip:
 JACKSONVILLE, FL 32202
 City-St-Zip:
 JACKSONVILLE, FL 32202

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

Name: SCHOLL, CAREY F Name: SCHOLL, CAREY F

Address: 303 LIBERTY ST. Address: 411 EAST MONROE STREET SUITE 101

City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32202

 Title:
 D
 (X) Delete
 Title:

 Name:
 PLATT, MYLEY A.,
 Name:

 Address:
 303 LIBERTY ST.
 Address:

 City-St-Zip:
 JACKSONVILLE, 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: TRACEY F. LESAGE STMD 04/30/2002