

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90011 012 ****61.25

DOCUMENT # 739464

1. Entity Name

PENSACOLA ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS, INC.

Principal Place of Business

1517 N. 9TH AVE
PENSACOLA FL 32503
US

Mailing Address

P O BOX 886
PENSACOLA FL 32534
US

2. Principal Place of Business

3. Mailing Address

P. O. Box 886

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Pensacola, FL

City & State

City & State

Zip

Country

Zip

Country

32594

US

4. FEI Number

59-1759639

Applied For

Not Applicable

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

CROOK, JIMMY
1517 N. 4TH AVE
PENSACOLA FL 32503

Name

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

City

FL

Zip Code

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

Jimmy Crook

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/20/02

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME DAY, RONNIE
STREET ADDRESS 153 HWY 97
CITY-ST-ZIP MOLINO FL 32577

TITLE President, Director ☐ Change ☒ Addition
NAME Gibson, Renee
STREET ADDRESS
CITY-ST-ZIP

TITLE PED ☒ Delete
NAME GIBSON, RENEE
STREET ADDRESS 5400 CORPORATE WOODS SUITE 800
CITY-ST-ZIP PENSACOLA FL 32504

TITLE President Elect, Director ☐ Change ☒ Addition
NAME LOVOY, EMMANUEL J.
STREET ADDRESS 4300 Bayou Blvd. #23
CITY-ST-ZIP Pensacola, FL 32503

TITLE DVP ☒ Delete
NAME LOVOY, EMMANUEL J
STREET ADDRESS 4300 BAYOU BLVD #23
CITY-ST-ZIP PENSACOLA FL 32503

TITLE Vice President, Director ☐ Change ☒ Addition
NAME Giordano, Chris
STREET ADDRESS 13 W. Garden St.
CITY-ST-ZIP Pensacola, FL 32501

TITLE TD ☒ Delete
NAME SEILMAN, WILLIAM G
STREET ADDRESS 1140 E 9 MILE RD
CITY-ST-ZIP PENSACOLA FL 32514

TITLE Treasurer, Director ☐ Change ☒ Addition
NAME Kobielnik, Michele
STREET ADDRESS 5514 N. Davis, Bldg F Suite 120
CITY-ST-ZIP Pensacola, FL 32504

TITLE SD ☒ Delete
NAME PETERSON, JOSEPH R
STREET ADDRESS 5401 CORPORATE WOODS SUITE 800
CITY-ST-ZIP PENSACOLA FL

TITLE Secretary, Director ☐ Change ☒ Addition
NAME Seelman, Bill
STREET ADDRESS 1140 E. 9 mile Rd.
CITY-ST-ZIP Pensacola, FL 32514

TITLE ED ☒ Delete
NAME CROOKE, JIMMY
STREET ADDRESS 1517 N. 9TH AVE
CITY-ST-ZIP PENSACOLA FL 32503

TITLE Executive Director, Director ☐ Change ☒ Addition
NAME Crooke, Jimmy
STREET ADDRESS 1517 N. 9th Ave.
CITY-ST-ZIP Pensacola, FL 32503

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jimmy Crooke Executive Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/02 (850) 433-7108

Date

Daytime Phone #

CR2E037 (9/01)