## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 802142

(0)

**UNIGARD SECURITY INSURANCE COMPANY** 

Descional Disease	-(C)	Moiling Addro	ACC.				4 (\$11 Billis Albii Alaii Alaii Bi		
Principal Place of Business  1215 FOURTH AVE. SEATTLE WASHINGTON 98161-8096		1215 FOURTH SUITE 1800	Mailing Address  1215 FOURTH AVENUE SUITE 1800 SEATTLE WASHINGTON 98161-1096						
		US US				3. Date Incorporated or Qualified 04/01/1925	1	Date of Last Report     02/09/1996	
2. Principal Pla	ace of Business	2a. Mailing Ad	ddress			4. FEI Number		Applied For	
21		26			91-0341780		Not Applicable		
Suite, Apt #	#, etc	Suite, Apt.	. #, etc.			5. Certificate of Status Desired		5 Additional Required	
22		27							
City & State	?	City & Stat	ю			Election Campaign Financing     Trust Fund Contribution		00 May Be ed to Fees	
<b>23</b> Ζιρ	Country	28     Zip		Country		This corporation has liability for i			
24	25	29		30			Yes No	3. 100.002.	
<u> </u>	9. Name and Address of Curr		nt	1001	12.11.1	10. Name and Address of New Re			
FISH	IER, JOHN E., ESQ.			81	Name				
	ANTIC BANK BLDG. SUITE 15	i00		82	Street Add	dress (P.O. Box Number is Not Acceptab	yle)		
	I. ORANGE AVE.			52	Directria	arbas (1.0. box riginisor is rior recopiate			
	ANDO FL 32802			83					
<b>4.</b> ,2				84	City		FL 85 Z	ip Code	
11. Pursuant t	to the provisions of Sections 607.0	0502 and 607, 1508, FI	orida Statut	es, the abov	I e-named co	rporation submits this statement for the p	surpose of changin	g its registere	
office or re	egistered agent, or both, in the St m familiar with, and accept the ob	ate of Florida. Such of	nange was a	authorized bi	v the corpora	ation's board of directors. I hereby accept	ot the appointment	as registered	
agont Las									
agent. I ar		<b>U</b>			-				
agent. Lar SiGNATURE	Stylia" in Expend or printed diame of registers of					juired whon reinstaling)	DATE		
agent. Lar SiGNATURE	Signature, typed or printed name of registered	ragent and title it applicable AND DIRECTORS	(NOT			puired when reinstaling)  ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECT		
agent. I ar SIGNATURE	Signal are Upod or profited name of registered OFFICERS .	ragent and title it applicable AND DIRECTORS		E Registered Ag					
agent. I ar SIGNATURE	Signal are typed or profied fischerol registered of PD SWEENEY, PAUL L.	ragent and title it applicable AND DIRECTORS	(NOT	E Registered Age			CERS AND DIRECT		
agent. I ar SIGNATURE	Stgnet are typed or profed ficence of register, of PD SWEENEY, PAUL L. 3 FAIR OAKS	ragent and title it applicable AND DIRECTORS	(NOT	13. 1.1 THLE			CERS AND DIRECT		
agent. Lar SIGNATURE  12. TITLE NAME STREEL ADDRESS CITY-ST-72P	Signal in Typed or profied factor of register, of OFFICERS I PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160	riagent and title if applicable AND DIRECTORS	(NOT	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5	ent signature req		CERS AND DIRECT	ge Additio	
agent. Lar SIGNATURE  12. TILE NAME STREEL ADDRESS CITY-ST-ZP PILE	Signal in Typed or profied factor of register, of OFFICERS .  PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD	riagent and title if applicable AND DIRECTORS	(NOT	13. 1.1 THLE 1.2 NAME 1.3 STREE 1.4 CHY-1 2.1 THLE	ent signature req		CERS AND DIRECT	ge Additio	
agent. Lar SIGNATURE  12. THE NAME STREEL ADDRESS CHY-SI-74 PILE NAME	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS	riagent and title if applicable AND DIRECTORS	(NOT	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME	ent signature req		CERS AND DIRECT	ge Additio	
agent. Lar SIGNATURE  12. THE NAME STREELAPORESS CHY-SI-ZP THE NAME STREELAPORESS	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 484 MARSHALL ST.	riagent and title if applicable AND DIRECTORS	(NOT	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE	I ADDRESS I ADDRESS		CERS AND DIRECT	ge Additio	
agent. Lar SIGNATURE  12. THE NAME STREELADORESS CHY-SI-ZP THE NAME STREELADORESS CHY-SI-ZP CHY-SI-ZP	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS	riagent and title if applicable AND DIRECTORS	(NOT	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-1	I ADDRESS I ADDRESS		CERS AND DIRECT	ge Addition	
agent. Lar SIGNATURE  12. TITLE NAME STREEL ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 484 MARSHALL ST. HOLLISTON MA 21746 T	riagent and title if applicable AND DIRECTORS	(NOT	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-1 3.1 TITLE	I ADDRESS ST-ZIP J ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECT Change	ge Addition	
agent. Lar SIGNATURE  12. TITLE NAME STREEL ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME NAME	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 464 MARSHALL ST. HOLLISTON MA 21746 T SELLERS, PAMELA S	riagent and title if applicable AND DIRECTORS	(NOT	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	I ADDRESS ST-ZIP J ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECT Change	ge Addition	
agent. Lar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-SI-ZP PILE NAME STREET ADDRESS CITY-SI-ZP TITLE NAME STREET ADDRESS STREET ADDRESS	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 464 MARSHALL ST. HOLLISTON MA 21746 T SELLERS, PAMELA S 8424 TILLMAN RD S.W.	riagent and title if applicable AND DIRECTORS	(NOT	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE	I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP		CERS AND DIRECT Change	ge Addition	
agent. Lar SIGNATURE  12. TITLE NAME STREEL ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME NAME	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 464 MARSHALL ST. HOLLISTON MA 21746 T SELLERS, PAMELA S	ragent and title if applicable AND DIRECTORS	(NOT	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECT Change	ge Addition	
agent. Lar SIGNATURE  12. TITLE NAME STREEL ADDRESS CITY-ST-ZP PILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 464 MARSHALL ST. HOLLISTON MA 21746 T SELLERS, PAMELA S 8424 TILLMAN RD S.W.	ragent and title if applicable AND DIRECTORS	(NOT  DELETE  DELETE	E Registored Ag  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY-  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-  3.1 TITLE  3.2 NAME  3.3 STREE  3.4 CITY-	I ADDRESS ST-ZIP I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFIC	□ Chan	ge Addition	
agent. Lar SIGNATURE  12. TITLE NAME STREELADORESS CITY-SI-ZP TITLE NAME STREELADORESS CITY-SI-ZP TITLE NAME STREELADORESS CITY-SI-ZP TITLE TAME THE TAME	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 464 MARSHALL ST. HOLLISTON MA 21746 T SELLERS, PAMELA S 8424 TILLMAN RD S.W.	ragent and title if applicable AND DIRECTORS	(NOT  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME	I ADDRESS ST-ZIP I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFIC	□ Chan	ge Addition	
agent. Lar SIGNATURE  12. TITLE NAME STREEL ADORESS CITY-SI-74P PILE NAME STREET ADORESS CITY-SI-74P TITLE NAME STREET ADORESS CITY-SI-74P TITLE NAME STREET ADORESS CITY-SI-74P TITLE NAME	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 464 MARSHALL ST. HOLLISTON MA 21746 T SELLERS, PAMELA S 8424 TILLMAN RD S.W.	ragent and title if applicable AND DIRECTORS	(NOT  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME	I ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFIC	Chan	ge Addition  ge Addition  ge Addition	
agent. Lar SIGNATURE  12. TITLE NAME STREEL ADDRESS CITY-ST-ZP PILE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 464 MARSHALL ST. HOLLISTON MA 21746 T SELLERS, PAMELA S 8424 TILLMAN RD S.W.	ragent and official applicable AND DIRECTORS	(NOT  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE	I ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFIC	□ Chan	ge Addition  ge Addition  ge Addition	
agent. Lar SIGNATURE  12. TITLE NAME STREEL ADDRESS CITY-ST-ZP PILE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CUTY-ST-ZIP	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 464 MARSHALL ST. HOLLISTON MA 21746 T SELLERS, PAMELA S 8424 TILLMAN RD S.W.	ragent and official applicable AND DIRECTORS	DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-	I ADDRESS ST-ZIP  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP  1 ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFIC	Chan	ge Addition  ge Addition  ge Addition	
agent. Lar SIGNATURE  TITLE NAME STREEL ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 464 MARSHALL ST. HOLLISTON MA 21746 T SELLERS, PAMELA S 8424 TILLMAN RD S.W.	ragent and official applicable AND DIRECTORS	DELETE  DELETE  DELETE	E Registured Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-1 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-1 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-1 5.1 TITLE 5.2 NAME	I ADDRESS ST-ZIP  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP  1 ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFIC	Chan	ge Addition  ge Addition  ge Addition	
agent. Lar SIGNATURE  12. TITLE NAME STREEL ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME NAME NAME NAME NAME	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 464 MARSHALL ST. HOLLISTON MA 21746 T SELLERS, PAMELA S 8424 TILLMAN RD S.W.	ragent and title if applicable AND DIRECTORS	DELETE  DELETE  DELETE	E Registured Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-	I ADDRESS ST-ZIP I ADDRESS	ADDITIONS/CHANGES TO OFFIC	Chan	ge Addition  ge Addition  ge Addition  ge Addition  ge Addition	
AGORE LANGE SIGNATURE  12. TITLE NAME SIRET ADDRESS CITY-ST-ZP TITLE NAME SIRET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CATY-ST-ZIP TITLE NAME STREET ADDRESS CATY-ST-ZIP TITLE NAME STREET ADDRESS	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 464 MARSHALL ST. HOLLISTON MA 21746 T SELLERS, PAMELA S 8424 TILLMAN RD S.W.	ragent and title if applicable AND DIRECTORS	DELETE  DELETE  DELETE	E Registored Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-  3.1 TITLE  3.2 NAME  3.3 STREE  3.4 CITY-  4.1 TITLE  4.2 NAME  4.3 STREE  4.4 CITY-  5.1 TITLE  5.2 NAME  5.3 STREE  5.4 CITY-  6.1 TITLE  6.1 TITLE	I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFIC	Chan	ge Addition  ge Addition  ge Addition  ge Addition  ge Addition	
agont. Lar SIGNATURE  12. TITLE NAME STREEL ADDRESS CITY-ST-ZP PITLE NAME STREEL ADDRESS CITY-ST-ZP TITLE NAME STREEL ADDRESS CITY-ST-ZP TITLE NAME STREEL ADDRESS CITY-ST-ZIP	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 464 MARSHALL ST. HOLLISTON MA 21746 T SELLERS, PAMELA S 8424 TILLMAN RD S.W.	ragent and title if applicable AND DIRECTORS	DELETE  DELETE  DELETE	E Registored Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-  3.1 TITLE  3.2 NAME  3.3 STREE  3.4 CITY-  4.1 TITLE  4.2 NAME  4.3 STREE  4.4 CITY-  5.1 TITLE  5.2 NAME  5.3 STREE  5.4 CITY-  6.1 TITLE  6.2 NAME	I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFIC	Chan	ge Addition  ge Addition  ge Addition  ge Addition  ge Addition	
agont. Lar SIGNATURE  12. TITLE NAME STREEL ADDRESS CITY-ST-ZP PILE NAME STREEL ADDRESS CITY-ST-ZP TITLE NAME STREEL ADDRESS CITY-ST-ZP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE	PD SWEENEY, PAUL L. 3 FAIR OAKS NEWTON MA 02160 VD MALONEY, THOMAS 464 MARSHALL ST. HOLLISTON MA 21746 T SELLERS, PAMELA S 8424 TILLMAN RD S.W.	ragent and title if applicable AND DIRECTORS	DELETE  DELETE  DELETE	E Registored Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-  3.1 TITLE  3.2 NAME  3.3 STREE  3.4 CITY-  4.1 TITLE  4.2 NAME  4.3 STREE  4.4 CITY-  5.1 TITLE  5.2 NAME  5.3 STREE  5.4 CITY-  6.1 TITLE  6.2 NAME	I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFIC	Chan	ge Addition  ge Addition  ge Addition  ge Addition  ge Addition	

NATURE: Panele Sellers - Heliker Treasurer 1/6/97 206-292-785

CR2E034 (9)

**FILED** 

Jan 24 1997 8:00am

Secretary of State