

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 812339

1. Entity Name

SOUTHERN INSURANCE COMPANY

**FILED**  
**Apr 21, 2000 8:00 am**  
**Secretary of State**

04-21-2000 90140 029 \*\*\*150.00

Principal Place of Business

Mailing Address

2727 TURTLE CREEK BLVD.  
P.O. BOX 660302  
DALLAS TX 75266-7302

2727 TURTLE CREEK BLVD.  
P.O. BOX 660302  
DALLAS TX 75266-0302

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

75-6021170

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER  
CAPITOL BUILDING  
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VPD  
FULTON, JOHN E.  
1731 ST JAMES DR  
CARROLLTON TX

☐ Delete

VPD  
FRIERSON, ROBERT W.  
8611 CHADBOURNE RD.  
DALLAS TX

☐ Delete

PD  
MILLIGAN, BRUCE, R  
4504 LORRAINE AVE  
DALLAS, TX 00000

☐ Delete

DVS  
DITTO, MICHAEL E.  
7012 BRIAR COVE DR  
DALLAS TX

☐ Delete

TCD  
HINSON, LAURA K  
4405 AMHERST  
DALLAS TX

☐ Delete

D  
MUDD, STEPHEN W  
1409 CHESAPEAKE  
PLANO TX

☐ Delete

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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STREET ADDRESS

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TCD

Cummings, Martin B.  
4617 Adrian Way  
Plano, TX 75024

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)