

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # 845097**

1. Entity Name

**SOUTHERN GUARANTY INSURANCE COMPANY****FILED****Jan 25, 2000 8:00 am**  
**Secretary of State**

01-25-2000 90061 034 \*\*\*150.00

Principal Place of Business

2545 TAYLOR RD.  
P.O. BOX 235004  
MONTGOMERY AL 36117  
US

Mailing Address

PO BOX 235004  
P.O. BOX 235004  
MONTGOMERY AL 36123-5004  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

STATE INSURANCE COMMISSIONER  
THE 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   | <input type="checkbox"/> Delete |
|-------|-------------------------|-----------------|---------------|---------------------------------|
|       | MERIWETHER, RUSH        | 2545 TAYLOR RD. | MONTGOMERY AL | <input type="checkbox"/>        |
|       | PC                      | 2545 TAYLOR RD. | MONTGOMERY AL | <input type="checkbox"/>        |
|       | RIDLING, JIM L.         | 2545 TAYLOR RD. | MONTGOMERY AL | <input type="checkbox"/>        |
|       | VSD                     | 2545 TAYLOR RD. | MONTGOMERY AL | <input type="checkbox"/>        |
|       | GREEN, GUY              | 2545 TAYLOR RD. | MONTGOMERY AL | <input type="checkbox"/>        |
|       | VD                      | 2545 TAYLOR RD. | MONTGOMERY AL | <input type="checkbox"/>        |
|       | DRAUGHON, JR., HENRY P. | 2545 TAYLOR RD. | MONTGOMERY AL | <input type="checkbox"/>        |
|       | VD                      | 2545 TAYLOR RD. | MONTGOMERY AL | <input type="checkbox"/>        |
|       | DUNN, WILLIAM R         | 2545 TAYLOR RD. | MONTGOMERY AL | <input type="checkbox"/>        |
|       | VD                      | 2545 TAYLOR RD. | MONTGOMERY AL | <input type="checkbox"/>        |
|       | KEITH, CHARLES L        | 2545 TAYLOR RD. | MONTGOMERY AL | <input type="checkbox"/>        |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Add |
|-------|------|----------------|-------------|---------------------------------|------------------------------|
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>     |
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>     |
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>     |
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>     |
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>     |
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>     |
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>     |
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>     |
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>     |
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>     |

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 reports 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 officers empowered.

Rush Meriwether

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/00

Date

(334) 270-6114

Daytime Phone #