

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 850386

1. Entity Name
LYNDON PROPERTY INSURANCE COMPANY

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90842 020 ***150.00

Principal Place of Business
520 MARYVILLE CENTRE DR
ST. LOUIS MO 63141-5815
US

Mailing Address
645 MARYVILLE CENTRE DRIVE
STE 200
ST. LOUIS MO 63141-5815
US

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
520 MARYVILLE CENTRE DR
Suite, Apt. #, etc.
Suite 500
City & State
ST LOUIS MO
Zip Country
63141



DO NOT WRITE IN THIS SPACE

4. FEI Number 43-1139865
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
INSURANCE COMMISSIONER
STATE OF FLORIDA
CAPITOL BLDG
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 _____ (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	PD ANDERSON, ROLAND G 645 MARYVILLE CENTRE DRIVE ST. LOUIS MO 63141-5815	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD CARIOLANO, GREGG O 645 MARYVILLE CENTRE DRIVE ST. LOUIS MO 63141-5815	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD HACKETT, RICHARD C 645 MARYVILLE CENTRE DRIVE ST. LOUIS MO 63141-5815	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KUPFERMAN, E. PERRY 645 MARYVILLE CENTRE DRIVE ST. LOUIS MO	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 520 MARYVILLE CENTRE DR.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 520 MARYVILLE CENTRE DR
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition VPD 520 MARYVILLE CENTRE DR
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 520 MARYVILLE CENTRE DR
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition VSD WILLIAM McMULLEN, JR 520 MARYVILLE CENTRE DR ST. LOUIS MO 63141-5815
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

CR2E034 (9/99)

00093056
856386

LYNDON PROPERTY INSURANCE COMPANY

DIRECTORS:

ROLAND G. ANDERSON
520 MARYVILLE CENTRE DRIVE
ST. LOUIS, MO 63141

GREGG O. CAROLANO
520 MARYVILLE CENTRE DRIVE
ST. LOUIS, MO 63141

RICHARD C. HACKETT
520 MARYVILLE CENTRE DRIVE
ST. LOUIS, MO 63141

E. PERRY KUPFERMAN
520 MARYVILLE CENTRE DRIVE
ST. LOUIS, MO 63141

JOSEPH R. McCAW
520 MARYVILLE CENTRE DRIVE
ST. LOUIS, MO 63141

STEVEN A. SCHULTS
2801 HWY 280 SOUTH
BIRMINGHAM, AL 35202

BRENT GRIGGS
2801 HWY 280 SOUTH
BIRMINGHAM, AL 35202

WILLIAM L. McMULLEN, JR.
2801 HWY 280 SOUTH
BIRMINGHAM, AL 35202

T. MICHAEL PRESLEY
2801 HWY 280 SOUTH
BIRMINGHAM, AL 35202