2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 25, 2001 8:00 am Secretary of State **DOCUMENT #850722** 1. Entity Name THE GRAY INSURANCE COMPANY 4-25-2001 90022 033 ***150.00 Principal Place of Business Mailing Address P O BOX 6202 3601 N I-10 SERVICE RD METAIRIE LA 70002-7045 METAIRIE LA 70009-6202 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 72-0824217 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name INSURANCE COMMISSIONER STATE OF FLORIDA Street Address (P.O. Box Number is Not Acceptable) CAPITAL BLDG TALLAHASSEE FL FL 32301 901 Zip Code FL 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) DATÉ FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. _____ - Addition - Delete TITLE TITLE GRAY, DENVER F. NAME NAME 3601 N I-10 SERVICE RD W STREET ADDRESS STREET ADDRESS METAIRIE LA CITY-ST-ZIP CITY-ST-ZIP TD X7 Change TITI F Delete TITLE ☐ Addition HUGES. ROBERT M = HUGHES, ROBERT M. NAME NAME STREET ADDRESS 3601 N I-10 SERVICE RD W STREET ADDRESS METAIRIE LA 70002-7045 CITY-ST-ZIP CITY-ST-ZIP VPD Change Addition TITLE ☐ Delete TITLE gray, walter verlander NAME NAME STREET ADDRESS 3601 N I-10 SERVICE RD W STREET ADDRESS CITY-ST-ZIP METAIRIE LA 70002-7045 CITY-ST-7/P ☐ Addition ☐ Delete TITLE ☐ Change TITLE GRAY, MICHAEL TOWNSEND NAME NAME 3601_N I-10_SERVICE_ROAD_W STREET ADDRESS STREET ADDRESS CITY-ST-ZIP METAIRIE LA 70002-7045 CITY-ST-ZIP VPD : ☐ Change ☐ Addition TITLE Delete TITLE GRAY, ERIC VERLANDER NAME NAME 3601 N I-10 SERVICE ROAD W STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP METAIRIE LA 70002-7045 TITLE ☐ Delete TITLE ☐ Change ☐ Addition MANGUNO, MARK STEVEN

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

3601 N I-10 SERVICE ROAD W

METAIRIE LA 70002-7045

NAME

STREET ADDRESS

CITY-ST-ZIP

APRIL 20, 2001

(504)888 - 7790

Daytime Phone #

CR2E034 (10/00)