

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 855243

FILED
Apr 11, 2002 8:00 AM
Secretary of State

Entity Name: UNITED NATIONAL INSURANCE AGENCY, INC.

Current Principal Place of Business:

5144 CENTRAL AVE
ST. PETERSBURG, FL 33743 US

New Principal Place of Business:

5144 CENTRAL AVE
ST. PETERSBURG, FL 33707 US

Current Mailing Address:

5144 CENTRAL AVE
P O BOX 41000
ST. PETERSBURG, FL 33743 US

New Mailing Address:

P O BOX 41000
ST. PETERSBURG, FL 33743 US

FEI Number: 59-2164141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALONEY, JOHN L. ESQ.
3862 CENTRAL AVENUE
SAINT PETERSBURG, FL 33711 US

Name and Address of New Registered Agent:

MALONEY, JOHN L. ESQ.
3862 CENTRAL AVENUE
SAINT PETERSBURG, FL 33711 US

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: JOHN L. MALONEY, ESQ.

04/11/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so ().

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: FRANKLIN, MATTHEW T
Address: 1713 1/2 ADAMS STREET
City-St-Zip: SAINT HELENA, CA 94574

Title: CPTS () Delete
Name: FRANKLIN, LARRY A.,
Address: 18201 GULF BLVD., UNIT 406
City-St-Zip: REDINGTON SHORES, FL 33708

Title: ASD () Delete
Name: FRANKLIN, JANA
Address: 18201 GULF BLVD., UNIT 406
City-St-Zip: REDINGTON SHORES, FL 33708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: FRANKLIN, MATTHEW T
Address: 1924 2ND STREET
City-St-Zip: NAPA, CA 94559

Title: CPTS (X) Change () Addition
Name: FRANKLIN, LARRY A
Address: 18201 GULF BLVD., UNIT 406
City-St-Zip: REDINGTON SHORES, FL 33708

Title: ASD (X) Change () Addition
Name: FRANKLIN, JANA L
Address: 18201 GULF BLVD., UNIT 406
City-St-Zip: REDINGTON SHORES, FL 33708

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY A. FRANKLIN

PRES

04/11/2002

Electronic Signature of Signing Officer or Director

Date