FILED SAPR 30, 2003 8:00 am Secretary of State 04-30-2003 90330 001 ***150.00

			V	1000						
Principal Place of Business 1511 KENTUCKY HOME LIFE BLDG LOUISVILLE KY 40202 US		Mailing Address 580 WALNUT STREET CINCINNATI OH 45202 US				1103045U				
2. Principal F	Place of Business	3. Mailing Address	3. Mailing Address						ALI BIRLI BIRLI I	/(Bi) Bizii (BB)
580 WALNUT STREET		·								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State				4. FEI Number 04 000 Per Applied For				
CINCINNATI, OH 45000		1				, , , ,	61-6027355		_ 	ot Applicable
Zip	Country	Zip	Country			E Conti	finate of Status Desired		\$8.75 Add	
45202	USA					5. Certificate of Status Desired Fee Required				
6. Name and Address of Current Registered Agent						7. Nam	e and Address of New Re	gistered A	gent	
	·			Name						
	SURANCE COMMISSIONER		Street Address ((P.O. Box Number is Not Acceptable)				
CAPITOL	BLDG.			ļ						
TALLAHA:	SSEE FL 32301									
				City				FL	Zip Cod	e
8. The above	named entity submits this statement	for the purpose of changing its	register	ed office or i	registere	ed agent	or both, in the State of Flor	ida. Lam fa	amiliar with.	and accept
	lions of registered agent.	to the purpose or onlying the	rogiotal	00 011100 011	.09.0.0.0	o agom,	or boar, in the otatio of the	idd: Tdiffi	arma man	
	-									
SIGNATURE .	Signature, typed or printed name of registered age	ent and title if applicable. (NOT	E: Registere	d Agent signatur	re required s	when reinstat	ing)	DATE		
	ILE NOW!!! FEE IS \$150.00									
	May 1, 2003 Fee will be \$550.00	,					9. Election Campaign Fina			May Be
	Payable to Florida Department						Trust Fund Contribution		Added	d to Fees
10.	OFFICERS AN	D DIRECTORS	11.			ADDIT	ONS/CHANGES TO OFFIC	CERS AND	DIRECTOR	S IN 11
TITLE	DVPC	☐ Delete	TITL	E					☐ Change	☐ Addition
NAME	jensen, keith a		NAM	IE						
STREET ADDRESS	580 WALNUT STREET		STRE	ET ADDRESS						
CITY-ST-ZIP	CINCINNATI OH 45202		CITY	-ST-ZIP						
TITLE	DVP	☐ Delete	TITLI	E					Change	☐ Addition
NAME	GRUBER, GARY J		NAM	· .						}
STREET ADDRESS	580 WALNUT STREET			ET ADDRESS						
CITY-ST-ZIP	CINCINNATI OH 45202		_	-ST-ZIP						
TITLE	DVPE	Delete	TITLI						☐ Change	☐ Addition
name Street address	HORRELL, KAREN H 580 WALNUT STREET		NAM STRE	ET ADDRESS						i
CITY-ST-ZIP	CINCINNATI OH 45202			-ST-ZIP						
TITLE	D	☐ Delete	TITLE		D.P.	RESID	ENT & CHAIRMAN		(X) Change	Addition
NAME	LARSON, DONALD D	€ Delete	NAM				OONALD D		ZZJ Gliange	Addition
STREET ADDRESS	580 WALNUT STREET			ET ADDRESS		-	JT STREET			ľ
CITY-ST-ZIP	CINCINNATI OH 45202	CITY		-ST-ZIP			TI, OH 45202			
TITLE	DVP	☐ Delete	TITLE	E		<u>, , , , , , , , , , , , , , , , , , , </u>	12, 011 /3202		☐ Change	Addition
NAME	ROSEN, EVE CUTLER		NAM	E						
STREET ADDRESS	580 WALNUT STREET		STRE	ET ADDRESS						
CITY-ST-ZIP	CINCINNATI OH 45202		CITY	-ST-ZIP						
TITLE	DPC	XI Delete	TITLE						Change	Addition
NAME	MINER, JOHN R		NAM	1						ſ
STREET ADDRESS	49 EAST FOURTH STREET			ET ADDRESS						
CITY-ST-ZIP CINCINNATI OH 45202 CIT 12. I hereby certify that the information supplied with this filling does not qualify for the ex-				-ST-ZIP	-1		77(0\f) Fi 1 7 1 1 1 1 1 1 1 1			
I nereby c	erriby that the information subhlied wi	ith this filling does not qualify for	r the eve	motion etate	nd in Sec	tion 110 (1773YO Florida Statutae 14	turther certi	ity that the ir	Mormation I

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

857204

WORLDWIDE DIRECT AUTO INSURANCE COMPANY

DOCUMENT #

1. Entity Name

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Zue

<u>513-369-5013</u>