2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2000 8:00 am
Secretary of State
05-10-2000 90101 010 ***150.00

DOCUMENT # 858336

1. Entity Name

STANDARD GUARANTY INSURANCE COMPANY

Principal Place of Business	Mailing Address
260 INTERSTATE NORTH CIR., NW ATTN: BUNNY BAUM ATLANTA GA 30339 US	P.O. BOX 50355 ATTN: BUNNY BAUM ATLANTA GA 30302-0355 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.: ~~260 Interstate North Circle, NW~~	Suite, Apt. #, etc.: ~~P.O. Box 50355~~
City & State: Atlanta, Georgia	City & State: Atlanta, Georgia
Zip: 30339	Zip: 30302
Country	Country

4. FEI Number 58-1529579 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
INSURANCE COMMISSIONER THE CAPITOL TALLAHASSEE FL 32301	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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C O'HARE, EDWARD J 260 INTERSTATE NORTH CIRCLE, NW ATLANTA GA 30339	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 260 Interstate North Circle,NW Atlanta, Georgia 30339
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MC NALLY, PETER 260 INTERSTATE NORTH CIRCLE, NW ATLANTA GA 30339	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 260 Interstate North Circle,NW Atlanta, Georgia 30339
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ATKINSON, JEROME ONE CHASE MANHATTAN PLAZA NEW YORK NY 10005	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition One Chase Manhattan Plaza New York, NY 10005
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HARPER, EDWIN L 260 INTERSTATE NORTH CIRCLE, NW ATLANTA GA 30339	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 260 Interstate North Circle, NW Atlanta, Georgia 30339
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS WEXLER, HOWARD B 260 INTERSTATE NORTH CIRCLE, NW ATLANTA GA 30339	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 260 Interstate North Circle,NW Atlanta, Georgia 30339
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WILLIAMS, JEFFREY W 260 INTERSTATE NORTH CIRCLE, NW ATLANTA GA 30339	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 260 Interstate North Circle,NW Atlanta, Georgia 30339

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: Bruce VanGeest 5/1/00 770 763-2469
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #