

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 08, 2003 8:00 am
Secretary of State

04-08-2003 90106 049 ***150.00

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DOCUMENT # F00000006998

1. Entity Name
INTERLEX INSURANCE COMPANY



Principal Place of Business
**1343 EAST KINGSLEY
SUITE G
SPRINGFIELD MO 65804**

Mailing Address
**1343 EAST KINGSLEY
SUITE G
SPRINGFIELD MO 65804**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **43-1327896**

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

**WORTELBOER, ROB
1000 RIVERSIDE AVE., STE 800
JACKSONVILLE FL 32204**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BENNETT, ANDREW K 2475 E. MONTCLAIR COURT SPRINGFIELD MO	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WHITE, STEVEN W 512 NE SAWGRASS COURT LEE'S-SUMMIT MO	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CARMICHAEL, LLOYD 908 AUGUSTA DRIVE SPRINGFIELD MO	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MOGAB, NANCY 955 TOWN & COUNTRY ESTATES COURT ST LOUIS MO	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SPATARO, PETER F 9035 FERNALD ST LOUIS MO	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Robert E. White Jr. 200 E. Kari Court Jacksonville, FL 32259	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D Kim D. Thorpe 8282 Riding Club Road Jacksonville, FL 32256	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T/D Roberta Goes Cown 4443 Royal Tern Court Jacksonville Beach, FL 32250	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Clifton R. Stepp 1165 W. Hickory Ridge Drive Nixa, MO 65714	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Robert A. Wulff Sr. 18131 Bent Ridge Wildwood, MO 63038	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Charles Divita III 282 Edgewater Branch Drive Jacksonville, FL 32259	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

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

Clifton R. Stepp

April 4, 2003

417-889-1010

Date

Daytime Phone *

CR2E034 (10/02)

Attachment

10061101
F00000006998

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

INTERLEX INSURANCE CO.

Directors -- Continued

D

Joseph Mawhinney
2469 Stoney Glen Drive
Orange Park, FL 32003

☐ Change

☒ Addition

D

Louis Sicilian
967 Garrison Drive
St. Augustine, FL 32092

☐ Change

☒ Addition