

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F93000003762

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: PAS FINANCIAL GROUP, INC.

Current Principal Place of Business:

C/O ASSURANT GROUP
11222 QUAIL ROOST DRIVE
MIAMI, FL 33157 US

New Principal Place of Business:

Current Mailing Address:

C/O ASSURANT GROUP
11222 QUAIL ROOST DRIVE
MIAMI, FL 33157 US

New Mailing Address:

FEI Number: 75-2321226 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BECK, JERRY DON
Address: 1410 WHITE CHAPEL ROAD
City-St-Zip: SOUTHLAKE, TX

Title: S () Delete
Name: HEGGEN, ARTHUR
Address: 11222 QUAIL ROOST DRIVE
City-St-Zip: MIAMI, FL 33157

Title: T () Delete
Name: CASTILO, ENRIQUE
Address: 11222 QUAIL ROOST DRIVE
City-St-Zip: MIAMI, FL 33157

Title: P () Delete
Name: BURSEVICH, GARY
Address: 11222 QUAIL ROOST DRIVE
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: COOPER, MARK A
Address: 1101 ARLENA DR
City-St-Zip: ARLINGTON, TX 76017

Title: VP () Delete
Name: MARAKAS, DONNA
Address: 11222 QUAIL ROOST DRIVE
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ARTHUR HEGGEN

S

04/30/2002

Electronic Signature of Signing Officer or Director

_____ Date