

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000001386

1. Entity Name

MID-AMERICA INSURANCE SERVICES, INC.

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90041 011 ***150.00

Principal Place of Business

Mailing Address

307 WEST 7TH STREET
SUITE 400
FT. WORTH TX 76102
US

300 ST PAUL PLACE
BALTIMORE MD 21202-2120
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **58-1664363**

Applied For
Not Applicable

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
SUITE 105
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 CPD
NAME WATSON, CHRISTOPHER E
STREET ADDRESS 388 GREENWICH ST, 21ST FLOOR
CITY-ST-ZIP NEW YORK NY 10013 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME INGBER, A L
STREET ADDRESS 75 HOLLY HILL LANE
CITY-ST-ZIP GREENWICH CT 06803 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME ZIEGLER, KENT W
STREET ADDRESS 388 GREENWICH ST, 21ST FLOOR
CITY-ST-ZIP NEW YORK NY 10013 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SVPT
NAME ZIEGLER, KENT
STREET ADDRESS 388 GREENWICH ST, 21ST FLOOR
CITY-ST-ZIP NEW YORK NY 10013 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME BANTIS, SPIRO K
STREET ADDRESS 388 GREENWICH ST, 21ST FLOOR
CITY-ST-ZIP NEW YORK NY 10013 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V
NAME FRITTS, SCOTT
STREET ADDRESS 388 GREENWICH ST, 21ST FLOOR
CITY-ST-ZIP NEW YORK NY 10013 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Alan L. Ingber REQUIRED Alan L. Ingber 4/14/00 (410)332-3000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)