

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90082 037 ***150.00

DOCUMENT # F94000001386

1. Entity Name
MID-AMERICA INSURANCE SERVICES, INC.



Principal Place of Business
307 WEST 7TH STREET
SUITE 400
FT. WORTH TX 76102
US

Mailing Address
300 ST PAUL PLACE
BALTIMORE MD 21202
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, 2002 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
CPD
WATSON, CHRISTOPHER E
388 GREENWICH ST, 21ST FLOOR
NEW YORK NY 10013 ☐ Delete

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

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

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

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D, SVPT ☒ Change ☐ Addition

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
TAX MANAGER
JOHN I JONES
300 ST PAUL PLACE
BALTIMORE, MD 21202 ☐ Change ☒ Addition

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

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
V
FRITTS, SCOTT
388 GREENWICH ST, 21ST FLOOR
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:

SIGNATURE REQUIRED

JOHN I. JONES

4/30/02

410-332-3000

Date

Daytime Phone #

CR2E034 (9/01)