(9/01)

CR2E034

FILED

2002 Uniform Business Report (UBR)

Mar 29, 2002 8:00 am Secretary of State DOCUMENT # F94000006320 1. Entity Name 03-29-2002 90830 036 ***150 00 LEADER SPECIALTY INSURANCE COMPANY Principal Place of Business Mailing Address 4100 HARRY HINES BLVD 4100 HARRY HINES BLVD DALLAS TE 75219 DALLAS TE 75219 ШŜ US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 34-1767787 Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name INSURANCE COMMISSIONER Street Address (P.O. Box Number is Not Acceptable) CAPITOL TALLAHASSEE FL 32399-0300 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. DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Change Addition TITLE ☐ Delete GOBER, JAMES R NAME NAME STREET ADDRESS 4100 HARRY HINES BLVD STREET ADDRESS DALLAS TE CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition KRAUSE, MICHAEL D NAME NAME STREET ADDRESS 4100 HARRY HINES BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX Delete TITLE TITLE Change ☐ Addition NAME NAME STONE, TOMMY J. STREET ADDRESS STREET ADDRESS 4100 HARRY HINES BLVD CITY-ST-ZIP DALLAS TE CITY-ST-ZIP ☐ Delete TXI Change ☐ Addition BAKER, DONALD A BEKER, DONALD A STREET ADDRESS 4100 HARRY HINES BLVD STREET ADDRESS 4100 HARRY HINES BLVD. CITY-ST-ZIP DALLAS TX 75219 CITY-ST-7IP DALLAS, TX 75219 ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change [] Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13:1 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.