

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State
 05-28-2002 91704 005 ***150.00

DOCUMENT # F95000005459

1. Entity Name

CEDAR HILL ASSURANCE COMPANY

Principal Place of Business

**8777 N GAINCY CTR DR.
 STE 250
 SCOTTSDALE, AZ 85258
 US**

Mailing Address

**8777 N. GAINCY CTR DR
 STE 250
 SCOTTSDALE AZ 85258
 US**

2. Principal Place of Business

8800 E. Chaparral Rd

Suite, Apt. #, etc.

#230

City & State

Scottsdale, AZ

Zip

85250

Country

USA

3. Mailing Address

8800 E. Chaparral Rd

Suite, Apt. #, etc.

#230

City & State

Scottsdale, AZ

Zip

85250

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

75-1467533

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**INSURANCE COMMISSIONER
 CAPITOL
 TALLAHASSEE FL 32399-0300**

7. Name and Address of New Registered Agent

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

TITLE **P** ☐ Delete
 NAME **PIERSON, FRANK**
 STREET ADDRESS **8777 N GAINCY CTR DR #250**
 CITY-ST-ZIP **SCOTTSDALE AZ 85258**

TITLE **D** ☒ Delete
 NAME **BRENNAN, COLLEEN**
 STREET ADDRESS **8777 N GAINCY CTR DR #250**
 CITY-ST-ZIP **SCOTTSDALE AZ 85258**

TITLE **D** ☐ Delete
 NAME **STRUPPECK, THOMAS**
 STREET ADDRESS **8777 N GAINCY-CTR DR #250**
 CITY-ST-ZIP **SCOTTSDALE AZ 85258**

TITLE **D** ☐ Delete
 NAME **DICKSON, THOMAS**
 STREET ADDRESS **8777 N GAINCY CTR DR, #250**
 CITY-ST-ZIP **SCOTTSDALE AZ**

TITLE **S** ☐ Delete
 NAME **KING, TAMBRA**
 STREET ADDRESS **8777 N GAINCY CTR DR, #250**
 CITY-ST-ZIP **SCOTTSDALE AZ 85258**

TITLE **P** ☐ Delete
 NAME **APRILL, PATRICIA**
 STREET ADDRESS **8777 N GAINCY CTR DR #250**
 CITY-ST-ZIP **SCOTTSDALE AZ 85258**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
 NAME **Pierson, Frank**
 STREET ADDRESS **8800 E. Chaparral Rd, #230**
 CITY-ST-ZIP **Scottsdale, AZ 85250**

TITLE **D** ☐ Change ☐ Addition
 NAME **Struppeck, Thomas**
 STREET ADDRESS **8800 E. Chaparral Rd, #230**
 CITY-ST-ZIP **Scottsdale, AZ 85250**

TITLE **D** ☒ Change ☐ Addition
 NAME **Dickson, Thomas**
 STREET ADDRESS **8800 E. Chaparral Rd, #230**
 CITY-ST-ZIP **Scottsdale, AZ 85250**

TITLE **S** ☒ Change ☐ Addition
 NAME **King, Tandra**
 STREET ADDRESS **8800 E. Chaparral Rd, #230**
 CITY-ST-ZIP **Scottsdale, AZ 85250**

TITLE **P** ☒ Change ☐ Addition
 NAME **Aprill, Patricia**
 STREET ADDRESS **8800 E. Chaparral Rd, #230**
 CITY-ST-ZIP **Scottsdale, AZ 85250**

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
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

Attachment to Doct#

F95000005459

Officers and Directors – Attachment

Document # F95000005459

Entity Name: Cedar Hill Assurance Company

Title:	D	Addition
Name:	Regan, Michael	
Street Address:	8800 E. Chaparral Rd, Ste #230	
City – St – ZIP:	Scottsdale, AZ 85250-2603	

Title:	D	Addition
Name:	Turk, Michael	
Street Address:	8800 E. Chaparral Rd, Ste #230	
City – St – ZIP:	Scottsdale, AZ 85250-2603	

Title:	D	Addition
Name:	Klaassen, Joel	
Street Address:	8800 E. Chaparral Rd, Ste #230	
City – St – ZIP:	Scottsdale, AZ 85250-2603	

Title:	D	Addition
Name:	Magnano, Joseph	
Street Address:	8800 E. Chaparral Rd, Ste #230	
City – St – ZIP:	Scottsdale, AZ 85250-2603	