2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F96000004456 1. Entity Name

THE PREMIUM COMPANY OF AMERICA

Principal Place of Business 4200 INNSLAKE DR. GLEN ALLEN VA 23060

Mailing Address

P.O. BOX 85058 . RICHMOND VA 23285-5058

2. Principal Place of Business 3. Mailing Address

FILED May 06, 2002 8:00 am Secretary of State

05-06-2002 90229 050 ***150.00



				1				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State		4.	4. FEI Number 54-1803752			pplied For lot Applicable
Žip	Country	Country Zip Cou		ntry 5. Certificate of Status Desired			\$8.75 Additional Fee Required	
	6. Name and Address of Current R	egistered Agent		7. 1	Name and Address of New Re	gistered		
				Name .				
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				Creat Address (D.O. Day Murch as is Not Assessed by)				
			Street Address (P.O. Box Number is Not Acceptable)					
	10N FL 33324							
PLANIAI	ION FL 33324							
	•		City			FL	Zip Co	de
3. The above	named entity submits this statement for t	the purpose of changing its re	egistered office o	r registered ag	gent, or both, in the State of Flor	ida.		
			Ü	•				
, SIGNATURE:	เสพาร โรก หนึ่งเรียกระส เลล เคยคั้งโดยเก							
Mary Tonic.	Signature, typed or printed name of registered agent and	d title if applicable. (NOTE: I	Registered Agent signat	ure required when re	einstating)	DATE		
9. This corporation is eligible to satisfy its intangible FILE NOW!!! F			FFF IS \$150.	.00				
Tax filling requirement and elects to do so. After May 1, 20					10. Election Campaign Fina			00 May Be
(See criter	ria on back)	Make Check Payable	e to Departmen	t of State	Trust Fund Contribution		→ Adde	d to Fees
1.	対 A M G T () OFFICERS AND D	IRECTORS	12.	AD	DDITIONS/CHANGES TO OFFICE	CERS AND	DIRECTOR	RS IN 11
ITLE	VPD STATES AND A PERSON	☐ Delete	TITLE				☐ Change	Addition
AME	SMITH, THOMAS K		NAME				_ ,	
TREET ADDRESS	4200 INNSLAKE DR.		STREET ADDRESS					
ITY-ST-ZIP	GLEN ALLEN VA 23060		CITY-ST-ZIP					
ITLE	VD	☐ Delete	TITLE				☐ Change	☐ Addition
IAME	KELLEY, JUDITH A	•	NAME					
TREET ADDRESS	4200 INNSLAKE DR.		STREET ADDRESS					
CITY-ST-ZIP	GLEN ALLEN VA 23060		CITY-ST-ZIP					
TTLE	VPD.	☐ Delete	TITLE				☐ Change	☐ Addition
AME	BLAND, RICHARD W E		NAME	-		~	• .	
TREET ADDRESS ITY - ST - ZIP	700 E. MAIN ST., STE. 1015		STREET ADDRESS CITY-ST-ZIP					
	RICHMOND VA 23219	——————————————————————————————————————		-			·= Ch	FT Addition
	PD	☐ Delete	TITLE	Execu	tive Vice Praid	euct	Change	Addition
TTLE TAME			NAME					
AME	CREWS, JOHN W		NAME STREET ADDRESS	4 Sec	retary	•		
AME TREET ADDRESS	CREWS, JOHN W 700 E. MAIN ST., #1015		NAME Street Address City-St-Zip	4 Sec	retary	•		
AME Treet address ITY-ST-ZIP	CREWS, JOHN W 700 E. MAIN ST., #1015 RICHMOND VA 23219	[□ Delete	STREET ADDRESS	4 Sec	retary	•	☐ Change	☐ Addition
THE TAME TREET ADDRESS ITY-ST-ZIP ITLE AME	CREWS, JOHN W 700 E. MAIN ST., #1015 RICHMOND VA 23219 DC	☐ Delete	STREET ADDRESS CITY-ST-ZIP	4 Sec	retary		☐ Change	Addition
ame Treet address ITY-ST-ZIP ITLE Ame	CREWS, JOHN W 700 E. MAIN ST., #1015 RICHMOND VA 23219 DC PATTERSON, KENNETH R	☐ Delete	STREET ADDRESS CITY-ST-ZIP TITLE	4 Sec	retrang		☐ Change	☐ Addition
AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS	CREWS, JOHN W 700 E. MAIN ST., #1015 RICHMOND VA 23219 DC	□ Delete	STREET ADDRESS CITY-ST-ZIP TITLE NAME	4 Sec.	retary		☐ Change	☐ Addition
TREET ADDRESS TY-ST-ZIP	CREWS, JOHN W 700 E. MAIN ST., #1015 RICHMOND VA 23219 DC PATTERSON, KENNETH R 4200 INNSLAKE DR. GLEN ALLEN VA 23060	☐ Delete	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	4 Sec	retary		☐ Change	☐ Addition
AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADORESS ITY-ST-ZIP	CREWS, JOHN W 700 E. MAIN ST., #1015 RICHMOND VA 23219 DC PATTERSON, KENNETH R 4200 INNSLAKE DR.		STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	4 Sec	retary			
TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP	CREWS, JOHN W 700 E. MAIN ST., #1015 RICHMOND VA 23219 DC PATTERSON, KENNETH R 4200 INNSLAKE DR. GLEN ALLEN VA 23060 PCEO		STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	4 Sec	retang			☐ Addition

indicated on this report or supplemental report is true and date and that my signature shall have the same legal effect as it made under oath; that I am an officer of 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.

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The Premium Company of America

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America BD% BO

Board of Directors

Kenneth R. Patterson, CPA, Chairman The Reciprocal Group 4200 Innslake Drive Glen Allen, VA 23060 (804) 965-1278 (804) 965-1346 (Fax) kpatterson@reciprocalgroup.com

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The Premium Company of America 60367601

2000/2001

Officers

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