2001	UNIFORM BUS	INESS REPO	)RT	(UBR)				
DOCUM 1. Entity Name	MENT # F98000	1003932	,					
FORD MOTOR Vehicle ASSURANC: Company					FILEL SLCRETÄRY'0 DIVISION OF COR	i FSTATE PORATIONS		
Principal Place of The A	Mailing Address The Ameri	Mailing Address The American Rd. Room 6.2		O MAY II A	M II: 34			
Deanborn, M. 48/21 Room 6.			1, M1	48/21				
2. Principal Place of Business		3. Mailing Address						i I 
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State		City & State		$\perp 0 \sqrt{-2} / \sqrt{6} \sqrt{2} \sqrt{2}$			Applied For	
Zip	Country	Zip	Country	у	5. Certificate of Status De	esired	\$8.75 /	Additional
	6. Name and Address of Current R	Registered Agent	L		7. Name and Address of	New Registere	<u> </u>	
CT CORPORAtiON System				Name				
CT CORPORA LION SYSTEM  1200 S. PINE ISLAND ROAD				Street Address	(P.O. Box Number is Not Acc	eptable)	<del></del>	<u> </u>
PLANTATION, FL 33324			<u> </u>					
ILAN 1411 BUT				City	FL Zip Code			ode
8. The above nar	med entity submits this statement for	the purpose of changing it:	registered	office or registe	red agent, or both, in the Stat	e of Florida.		
SIGNATURE	nature, typed or printed name of registered agent an	While I controlled (AVC E	- Requirement A	gent signature require	Tunos constitues	DATE	<del></del>	
9. This corporation	on is eligible to satisfy its Intangible	FILE NOW!	!) FEE IS	\$150.00	10. Election Campa	<del></del>	\$5	.00 May Be
(See criteria o	er back)	After MAY 1, 200 Make Check Payabl			Trust Fund Cont	ribution.	☐ Add	ded to Fees
11.	OFFICERS AND D		12. TITLE		ADDITIONS/CHANGES T	O OFFICERS AN	ID DIRECTO	
NAME (	William C. Con Ne	2/14.	NAME				ondrig.	
STREET ADDRESS CITY-ST-ZIP	be American Deanborn, M	Rd: 48/21	STREET /	ADDRESS - Zip				
TITLE	4.0		TITLE				☐ Change	
NAME STREET ADDRESS	I I DE I I COLO		NAME STREET ADDRESS		0000043356708 -05/31/0101039007			
CITY-ST-ZIP	DEARBORN, M. 40/21		CITY-ST-ZIP			*1050.00		150 <u>.</u> 00 —
TITLE 7	The America	b Delete	NAME					Addition
STREET ADDRESS CITY-ST-ZIP	DeanboRN, M.	48/21	STREET A					
TITLE	SPATER ChARRY	JR □ Delete	TITLE		·	<del></del>	☐ Change	: Addition
NAME STREET ADDRESS	The AMERICAN	Rd	NAME STREET A	ODRESS				
CITY-ST-ZIP	Degreborn, M	n; 48/21	CITY-ST-	- ZIP				
TITLE NAME	Thomas Rack	Ley Delete	TITLE NAME				Change	Addition
STREET ADDRESS CITY - ST - ZIP	The America	N ROLL	STREET A CITY-ST-					
TITLÉ	Day A := CVOO	v □ Delete	TITLE				☐ Change	Addition
NAME STREET ADDRESS	The American	V Rd	NAME Street a	DDRESS				
CITY-ST-ZIP	Deanbonn, 1	n, 48/21	CITY-ST-					
indicated on the of the corporate changed, or or	y that the information supplied with the his report or supplemental report is tru- tion or the receiver or trustee empower in an attachment with an address, with	ue and accurate and that my ered to execute this report as	y signature is required	shall have the s by Chapter 607, A 55 / 57 A	ame legal effect as if made u Florida Statutes; and that my INT TREASURE	inder oath; that I i name appears i	am an office n Block 11 d	er or director or Block 12 if
SIGNATUR		L. Signal	CKA	ich. Sic	WUNTN 4-27-	-01 31	3-323	1500
	SIGNATURE AND TYPED OR PRINT	ED NAME OF SIGNING OFFICER OR	DIRECTOR		Date	C	aytime Phone #	

## **Directors, Officers Report**

## Ford Motor Vehicle Assurance Company

October 01, 1998

## DIRECTORS

William C. Connelly

Art Fitzgerald

Craig Green

James M. Moritz

Thomas Rackley

Director

Director

## **OFFICERS**

William C. Connelly
Art Fitzgerald
Craig Green
Thomas Rackley
Peter Sherry, Jr.
Ann Mario Petach
Pank A. Barns CRAig L. Sigwerth
Jan A. Bertsch

Chainnan & Chief Executive Officer
President
Vice President & Controller
Vice President & Chief Tax Officer
Secretary
Treasurer
Assistant Secretary
ASS' FECKETARY

Assistant Treasurer

PAGE.001