

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 19, 2001 8:00 am
Secretary of State

04-19-2001 90332 030 ***150.00

DOCUMENT # F98000005423

1. Entity Name

AVOMARK INSURANCE COMPANY

Principal Place of Business

Mailing Address

136 N. THIRD ST
HAMILTON OH 45025

AVAMARK INSURANCE COMPNAV
9450 SEWARD RD.
FAIRFIELD OH 45014

00039234



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **31-1482353**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MORTON, TOM
500 WINDERLEY PLACE STE 200
MAITLAND FL 32751

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, 2001 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
CEOP
WOODALL, WILLIAM L
136 N 3RD ST.
HAMILTON OH 45025 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MARCUM, JOSEPH L
475 OAKWOOD DR
HAMILTON OH 45013 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO/Pres.
Dan R. Carmichael
136 North Third Street
Hamilton, OH 45025 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVSD
SLONEKER, HOWARD L III
7 LITTLE CREEK LANE
CINCINNATI OH 45246 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
BURTON, SARAH L
136 N. 3RD STREET
HAMILTON OH 45025 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Dennis E. McDaniel
136 North Third St.
Hamilton, OH 45025 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP
RICZKO, ELIZABETH M
136 N 3RD ST.
HAMILTON OH 45025 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP/Treasurer ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP
EVANS, MICHAEL L
136 N. 3RD ST.
HAMILTON OH 45025 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP
Debra K. Crane
136 North Third Street
Hamilton, OH 45025 ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dennis E. McDaniel

4/4/01

Date

(513) 603-2197

Daytime Phone #

CR2E034 (10/00)