## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## 04-22-2003 90119 001 \*2,100.00 DOCUMENT # F9900006632 1. Entity Name ITRUST INSURANCE AGENCY, INC. 1000000 Principal Place of Business Mailing Address 1345 \$ 52ND STREET 7 WEST SEVENTH ST. CINCINNATI, OH 45202 TEMPE, AZ 85284 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FE Zip Country Zip Country 5. Ce 5. Name and Address of Current Registered Agent 7. Na CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. Street Address (P.Q. Box PLANTATION, FL 33324 СIV 8. The above named entity submits this statement for the purpose of changing its registered office or registered ager the obligations of registered agent. SIGNATURE (NOTE: Rouis sand Agent signature required when reint Signature, typod or printed name of registered agent and title if applicable FILE NOWIL FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADD 11. 10. Delete TITLE TITLE NAMÊ AMANN, JAMES NAME 9111 DUKE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZP **MASON, OH 45040** City-St-7IP VTCF ☐ Delete TITLE TITLE LAMBERT, BILL NAME NAME STREET ADDRESS 1345 S 52ND STREET STREET ADDRESS TEMPE, AZ 85284 CITY-ST-ZIP CITY-ST-ZP TITLE ☑ Delete THE NAME SIMS, JOHN R NAME Padma T STREET ADDRESS 7 WEST SEVENTH STREET STREET ADDRESS 7 West Cincinn CINCINNATI, OH 45202 CITY-ST-2IP CITY-ST-ZP ☐ Delete GLUECK, NEAL J NAMÉ NAME 7 WEST SEVENTH STREET STREET ADDRESS STREET ADDRESS CINCINNATI, OH 45202 CITY-ST-ZP CITY-ST-ZIP VP/D ☐ Defete TITLE TITLE BRODERICK, DENNIS J NAME 7 WEST SEVENTH STREET STREET ADDRESS STREET ADDRESS CINCINNATI, OH 45202 CffY-ST-7(P CITY-ST-ZP ☐ Delete TITLE AS TITLE COX, JACK B NA ME STREET ADDRESS 7 WEST SEVENTH STREET STREET ADDRESS CITY-ST-2P CINCINNATI, OH 45202 CffY-Sf-21P 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 11 indicated on this report or supplemental report is true and accurate and that my signature shall have the same let of the corporation or the receiver or trystee empowered to execute this report as required by Chapter 607, Florida changed, or on an attachment with an address, with all other like empowered.

Jack B.

Cox.

**FILED** Apr 22, 2003 8:00 am Secretary of State

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19.07(3)(i), Florida Statutes. I further certify that the information gal effect as if made under oath; that I am an officer or director a Statutes; and that my name appears in Block 10 or Block 11 if			
eretary 4/15/03 (513) 579-7311			

Affachment AFG900000(de32/55028885 iTrust Insurance Agency, Inc.

## **Directors:**

Dennis J. Broderick Joel Belsky 7 West Seventh Street, Cincinnati, OH 45202 7 West Seventh Street, Cincinnati, OH 45202

## Officers:

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President
Vice Pres., CFO and Treasurer
Vice President
Vice President
Vice President
Secretary
Assistant Secretary

James Amann
Bill Lambert
Dennis J. Broderick
Terrance R. Gorbach
Neal J. Glueck
Padma Cariappa
Jack B. Cox
Klaus M. Ziermaier
Stephanie Johns-Chin
Ricky D. Rieger
Wingyee Choi
Michael Cohen
Peter James

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1345 South 52nd Street, Tempe, AZ 85284
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