

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **G53681**
 1. Entity Name
Hms Insurance Agency, Inc.

AMENDED

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 00 OCT 20 PM 5:38

Principal Place of Business
1625 NW 136th Ave, Ste. 200
Ft. Lauderdale, FL 33323

Mailing Address
P.O. BOX 551540
Ft. Lauderdale, FL 33355

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2388171

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
Cynthia J. Starnett
1625 NW 136th Ave, Ste. 200
Ft. Lauderdale, FL 33323

7. Name and Address of New Registered Agent
 Name
Robert Judges
 Street Address (P.O. Box Number is Not Acceptable)
1625 NW 136th Ave, Ste. 200
 City
Ft. Lauderdale FL Zip Code
33323

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both.
 SIGNATURE: **Robert Judges**
 Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)
 200009447718-4
 -11/01/00--01110--008
 10/20/05 ***61.25
 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, 2000 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 NAME STREET ADDRESS CITY-ST-ZIP	P Kenneth E. Harthausen <input checked="" type="checkbox"/> Delete 1625 NW 136th Ave, Ste. 200 Ft. Lauderdale, FL 33323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	A <input checked="" type="checkbox"/> Delete Howard L. Wolk 1625 NW 136th Ave, Ste. 200 Ft. Lauderdale, FL 33323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST <input checked="" type="checkbox"/> Delete Cynthia J. Starnett 1625 NW 136th Ave, Ste. 200 Ft. Lauderdale, FL 33323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Howard L. Wolk 1625 NW 136th Ave, Ste. 200 Ft. Lauderdale, FL 33323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition ST Robert Judges 1625 NW 136th Ave, Ste. 200 Ft. Lauderdale, FL 33323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Colleen Doolin 1625 NW 136th Ave, Ste. 200 Ft. Lauderdale, FL 33323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: **Robert Judges**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Robert Judges Secy/Treas 10/12/05 954-835-1900
 Date Daytime Phone