

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 27, 2003 8:00 am
Secretary of State

06-27-2003 90052 001 ***158.75

DOCUMENT # 492180

1. Entity Name
A Ability Cover All Insurance
AGENCY, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3354 Davis Macaulay Pl.

3. Mailing Address
3354 Davis Macaulay Pl.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Melbourne, FL

City & State
Melbourne, FL

4. FEI Number
59-2619905

Applied For
Not Applicable

Zip
32934

Country
USA

Zip
32934

Country
USA

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Patrick J. Moriarty

Street Address (P.O. Box Number is Not Acceptable)

3354 Davis Macaulay Pl.

City Melbourne FL Zip Code 32934

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director, Vice President
Patrick J. Moriarty
3354 Davis Macaulay Pl.
Melbourne, FL 32934

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director, President
Maureen A. Moriarty
3354 Davis Macaulay Pl.
Melbourne, FL 32934

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Treasurer
Kerry M. Ramage
4130 San Ysidro Way
Rockledge, FL 32955

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Patricia Ferrick
8800 Old Keene Mill Road
Springfield, VA 22152

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Patrick J. Moriarty*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-23-03

321
757-8406

Date Daytime Phone #

CR2E034B (12/02)

ATTACHMENT

10109000
H92180

A Ability Cover All Insurance Agency, Inc.

3354 Davis Macaulay Place
Melbourne, Florida 32934

23 June 2003

To Florida Department of State, Division of Corporations:

Upon recent review of my personal business files I discovered that I did have my 2003 Uniform Business Report and do not recall ever receiving it. I contacted your office on 17 May 2003 and spoke with Esther Griggs. Ms. Griggs informed me that she would send me another form as your office did not have my form on file. I have completed and included the new form.

I am requesting that any late charges be removed if possible and have included a check for \$150.00. Please contact me at the above address if any additional fees are due.

Sincerely,



Patrick J. Moriarty