## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J29634

Entity Name: MOUNT VERNON INSURANCE CO., INC.

FILED Feb 25, 2003 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

924 SOUTH GONDOLA DRIVE 41 FAIRHAVEN DRIVE

VENICE, FL 34293 US CHEEKTOWAGA, NY 14225 US

Current Mailing Address: New Mailing Address:

924 SOUTH GONDOLA DRIVE 41 FAIRHAVEN DRIVE

VENICE, FL 34293 US CHEEKTOWAGA, NY 14225 US

FEI Number: 59-2721663 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FISCHER, LEE J. PLUM, LAURA A CPA
924 SOUTH GONDOLA DRIVE 1800 SECOND STREET
VENICE, FL 34293 SUITE 745
SARASOTA, FL 34236

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: LAURA A. PLUM 02/25/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

Name: FISCHER, LEE J Name: FISCHER, LEE J
Address: 924 S GONDOLA DR Address: 41 FAIRHAVEN DRIVE

City-St-Zip: VENICE, FL 34293 City-St-Zip: CHEEKTOWAGA, NY 14225 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEE J. FISCHER PRES 02/25/2003

Electronic Signature of Signing Officer or Director

Date