

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# K57538

FILED
Jan 16, 2002 8:00 AM
Secretary of State

Entity Name: THE INSURANCE CENTER, INC.

Current Principal Place of Business:

2519 MCMULLEN BOOTH ROAD
SUITE 508
CLEARWATER, FL 33761 US

New Principal Place of Business:

4605 S. TAMIAMI TRAIL
SARASOTA, FL 34231 US

Current Mailing Address:

2519 MCMULLEN BOOTH ROAD
SUITE 508
CLEARWATER, FL 33761 US

New Mailing Address:

FEI Number: 65-0100615 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCVEIGH, PAMELA
2519 MCMULLEN BOOTH ROAD
SUITE 508
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NAUGHTON, JOHN J
Address: 4605 S. TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34231

Title: VPS () Delete
Name: MCVEIGH, PAMELA M.,
Address: 2519 MCMULLEN BOOTH ROAD SUITE 508
City-St-Zip: CLEARWATER, FL 33761 US

Title: V () Delete
Name: CALLAGHAN, WILLIAM G
Address: 4605 S. TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: MCNAMARA, DANIEL J
Address: 4605 S. TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34231 US

Title: D () Delete
Name: FOLEY, PATRICK J
Address: 4605 S. TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34231 US

Title: D () Delete
Name: MILLER, STEPHEN J
Address: 4605 S. TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34231 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: VANDERPUTTEN, LEROY A
Address: 4605 S. TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34231

Title: VS (X) Change () Addition
Name: MCVEIGH, PAMELA M
Address: 2519 MCMULLEN BOOTH ROAD SUITE 508
City-St-Zip: CLEARWATER, FL 33761 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
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Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PAMELA M MCVEIGH

VS

01/16/2002

Electronic Signature of Signing Officer or Director

Date