

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K73268

1. Entity Name

PROFESSIONAL INSURANCE UNDERWRITERS, INC.

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90287 027 ***150.00

Principal Place of Business

C/O PHILIP E. MORGAMAN
P.O. BOX 9008
FT. LAUDERDALE FL 33310

Mailing Address

C/O PHILIP E. MORGAMAN
P.O. BOX 9008
FT. LAUDERDALE FL 33310



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0204614

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

JONES, MATTHEW T ESQ
1600 W COMMERCIAL BLVD
FT. LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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, 2002 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 DC ☐ Delete
NAME MORGAMAN, PHILIP E.
STREET ADDRESS 1600 W COMMERCIAL BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE DP ☐ Delete
NAME STEPHENSON, MARKS
STREET ADDRESS 1600 W COMMERCIAL BLVD
CITY-ST-ZIP FT. LAUDERDALE FL 33309

TITLE D ☐ Delete
NAME NICHOLS, NEAL
STREET ADDRESS 3251 WASHINGTON BLVD
CITY-ST-ZIP ARLINGTON VA 22201

TITLE D ☐ Delete
NAME CAMILLO, JOHN M
STREET ADDRESS 1600 W COMMERCIAL BLVD
CITY-ST-ZIP FORT LAUDERDALE FL 33309

TITLE DV ☐ Delete
NAME SPRUCE, WILLIAM D
STREET ADDRESS 1600 W. COMMERCIAL BLVD
CITY-ST-ZIP FT LAUDERDALE FL 33309

TITLE V ☐ Delete
NAME GARDNER, DEBORAH S
STREET ADDRESS 1600 W COMMERCIAL BLVD
CITY-ST-ZIP FT LAUDERDALE FL 33309

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)