Apr-30-02 12:08P Angela F North & Company 81

FILED
May 27, 2002 8:00 am
Secretary of State
05-27-2002 90431 005 ***158.75

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L41041

1. Entity Name
GARY MARKEL ENTERPRISES, INC.

670846

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1901 ULMERTON RD.	
Suite, Apt. #, etc. STE. 700	Suite, Apt. #, etc.
City & State CLEARWATER, FL	City & State
Zip 33762 Country	Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 592980099 — Applied For / Not Applicable

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 GARY L. MARKEL
Street Address (P.O. Box Number is Not Acceptable) 1901 ULMERTON RD.
STE. 700
City CLEARWATER FL Zip Code 33762

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 ______________________ DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee Is $150.00
After May 1, Fee Is $550.00
Amended UBR Is $61.25
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	P	TITLE	
NAME	MARKEL, GARY L.	NAME	
STREET ADDRESS	1901 ULMERTON RD. STE. 700	STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER, FL 33762	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Gary L. Markel 4.30.02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #