2001 UNIFORM BUSINESS REPORT (UBF

FILED Jul 25, 2001 8:00 am Secretary of State 07-25-2001 90009 016 ****61.25

DOCUMENT # N40911

1. Entity Name

CENTRAL FLORIDA	. Association of	HEALTH	underwrite
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Principal Plac P.O. BOX 160	790	Mailing Address P.O. BOX 160790			- 1960ana			
	SPRINGS FL 32716-0790	ALTAMONTE SPRINGS FL 3	2716-0790					
2. Principal P	lace of Business	3. Mailing Address			18 18121 (ÚBEL 1981 BIBAL BIBAL BIBAL BIBAL B	idil digil iddi		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		DON	NOT WRITE IN THIS SPACE			
City & Stat	е	City & State		4. FEI Number 59-30	M1609	pplied For ot Applicable		
Zip	Country	Zip -	Country	5. Certificate of Status D	Desired S8.75 Ad Fee Require			
، حدث جي		Registered Agent	THE SERVE	7. Name and Address of	of New Registered Agent			
			Name	BARBARA M. ELVE	ΞY			
DUFFY, D	ENNIS M		Street Address (P.O. Box Number is Not Acceptable) 2700 WESTHALL LANE, STE. 235					
1801,4EE			\	·				
SUITE 30			City	<u> </u>	7 - C	10		
WINTER F	PARK FL 32789		City	MAITLAND	FL Zip Coo	751		
8. The above	named entity submits this statement for	r the purpose of changing its re	egistered office or	registered agent, or both, in the sta	ate of Florida.			
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SIGNATURE,	Durbana)	M. Elwy	, Ire	asuru	7-18-01			
0.0.0.0.0.0	Signature, typed or printed name of registered agent a		Registered Agent signatu	are required when reinstating)	DATE .			
					i			
	FILE NOW: FEE IS \$61.25	9. Election Camp 7 Trust Fund Co		\$5.00 May Be	Make Check Payable			
After Septe	ember 12, 2001, min. will be \$2	36.25 Must Fund Co	MINDUNON.	☐ Added to Fees	Department of State	e I		
10.				,	j "			
10.	OFFICERS AND DIR	RECTORS	11.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTORS IN			
TITLE	T	RECTORS	TITLE	ADDITIONS/CHANGES TO TREASURER	OFFICERS AND DIRECTORS IN XXII Change	V 10		
TITLE NAME	T DUFFY, DENNIS M		TITLE NAME			V 10		
TITLE NAME STREET ADDRESS	T DUFFY, DENNIS M 1801 LEE ROAD, SUITE 304		TITLE NAME STREET ADDRESS	TREASURER BARBARA M. ELVEY 2700 WESTHALL LAN	X\(\overline{\text{\text{NE}}}\) Change	V 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DUFFY, DENNIS M 1801 LEE ROAD, SUITE 304 WINTER PARK FL 32789	∑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER BARBARA M. ELVEY 2700 WESTHALL LAN MAITLAND, FL 3275	X\ Change NE, STE. 235	J 10 Addition		
TITLE NAME STREET ADDRESS	T DUFFY, DENNIS M 1801 LEE ROAD, SUITE 304		TITLE NAME STREET ADDRESS	TREASURER BARBARA M. ELVEY 2700 WESTHALL LAN MAITLAND, FL 3275 PRESIDENT	XXI Change NE, STE. 235 XI Change	V 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	T DUFFY, DENNIS M 1801 LEE ROAD, SUITE 304 WINTER PARK FL 32789 PD _	∑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	TREASURER BARBARA M. ELVEY 2700 WESTHALL LAN MAITLAND, FL 3275 PRESIDENT DAVID M. SHERRILL	XXI Change NE, STE. 235 SI XI Change	J 10 Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	T DUFFY, DENNIS M 1801 LEE ROAD, SUITE 304 WINTER PARK FL 32789 PD CRUMLY, JIM 3452 LAKE LYNA, STE 365 ORLANDO FL 32817-1417	∑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	TREASURER BARBARA M. ELVEY 2700 WESTHALL LAN MAITLAND, FL 3275 PRESIDENT DAVID M. SHERRILL 427 CENTERPOINT C ALTAMONTE SPRINGS	XX Change NE, STE. 235 SI Change CR., STE. 1841 S, FL 32701	Addition Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DUFFY, DENNIS M 1801 LEE ROAD, SUITE 304 WINTER PARK FL 32789 PD CRUMLY, JIM 3452 LAKE LYNA, STE 365 ORLANDO FL 32817-1417	∑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	TREASURER BARBARA M. ELVEY 2700 WESTHALL LAN MAITLAND, FL 3275 PRESIDENT DAVID M. SHERRILL 427 CENTERPOINT C ALTAMONTE SPRINGS PRESIDENT ELECT	XXI Change NE, STE. 235 51 XI Change CR., STE. 1841	J 10 Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS TOTY-ST-ZIP TITLE NAME NAME	T DUFFY, DENNIS M 1801 LEE ROAD, SUITE 304 WINTER PARK FL 32789 PD CRUMLY, JIM 3452 LAKE LYNA, STE 365 ORLANDO FL 32817-1417 S BLANK, LYNN	Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ** TITLE NAME	TREASURER BARBARA M. ELVEY 2700 WESTHALL LAN MAITLAND, FL 3275 PRESIDENT DAVID M. SHERRILL 427 CENTERPOINT C ALTAMONTE SPRINGS PRESIDENT ELECT DALE MALONEY	XX Change NE, STE. 235 SI Change CR., STE. 1841 5, FL 32701 X Change	Addition Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DUFFY, DENNIS M 1801 LEE ROAD, SUITE 304 WINTER PARK FL 32789 PD CRUMLY, JIM 3452 LAKE LYNA, STE 365 ORLANDO FL 32817-1417 S BLANK, LYNN 1040 WOODCOCK RD. STE. 260 ORLANDO FL 32803 VPD BURNS, TANYA 2519 E. SOUTH ST. #103 ORLANO FL 32803	Delete Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER BARBARA M. ELVEY 2700 WESTHALL LAN MAITLAND, FL 3275 PRESIDENT DAVID M. SHERRILL 427 CENTERPOINT C ALTAMONTE SPRINGS PRESIDENT ELECT DALE MALONEY 1434 FAIRBANKS AV WINTER PARK, FL 3 1ST VP DANIEL L. YOUNT 7680 UNIVERSAL BL ORLANDO, FL 32819 SECRETARY LYNN BLANK	XX Change NE, STE. 235 CR., STE. 1841 S; FL 32701	Addition Addition Addition Addition		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

7-18-01 800 -342-2007 ×

7-18-01 800-342-2007 ×11