2002 UNIFORM BUSINESS REPORT (UBR)

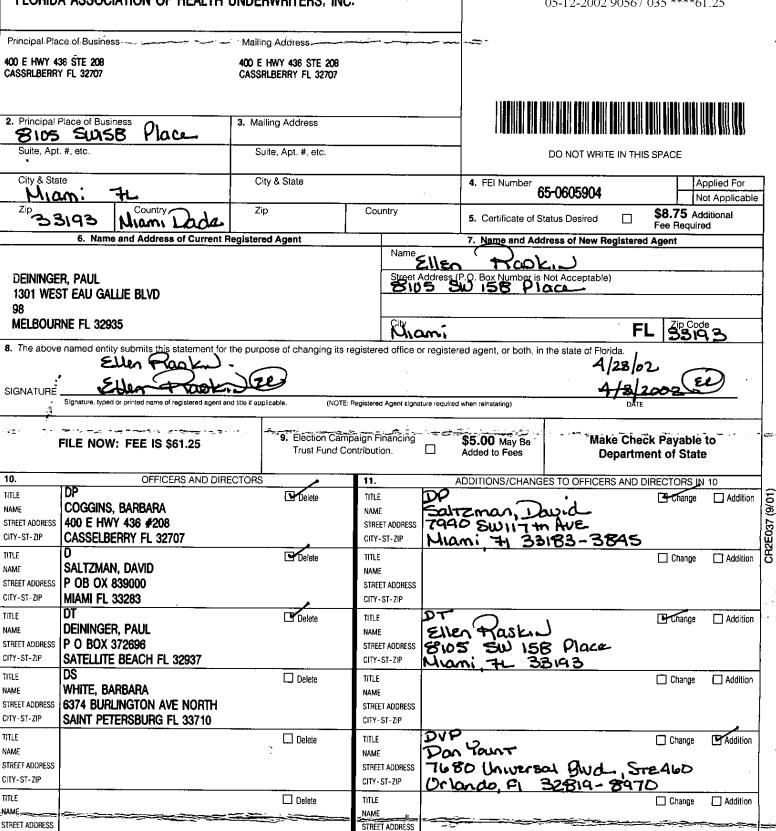
DOCUMENT # **N94000004815**

1. Entity Name

FLORIDA ASSOCIATION OF HEALTH UNDERWRITERS, INC. Principal Place of Business ---- : Mailing Address 400 E HWY 436 STE 208 400 E HWY 436 STE 208 CASSRLBERRY FL 32707 CASSRLBERRY FL 32707 2. Principal Place of Business 3. Mailing Address Place 8105 SWSB Suite, Apt. #, etc. Suite, Apt. #, etc.

FILED May 12, 2002 8:00 am Secretary of State

12-2002 90567 035 ****61.25



12. 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 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.

CITY-ST-7IP

SIGNATURE:

CITY-ST-ZIP

36 382 4911