2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000004459

QUALSURE INSURANCE CORPORATION

Principal Place of Business

Mailing Address

1680 FRUITVILLE RD., STE. 200 SARASOTA FL 34230

2. Principal Place of Business

506 Sarasota Quar

P.O. BOX 3918 SARASOTA FL 34230

3. Mailing Address

506 Sarasota Quay

FILED Mar 02, 2001 8:00 am Secretary of State

03-02-2001 90089 014 ***150.00

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9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. Atter MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
Section Sect							4.	1.1				
S. Name and Address of Current Registered Agent 8. Name and Address of Current Registered Agent HABEN, RALPH H JR 1435 E. PIEDMONT DR, STE. 110 TALLAHASSEE FI. 32312 City FL Zio 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 Signatur, specify or thick area of registered agent, or both, in the State of Florida. SIGNATURE Signatur, specify or thick area of registered agent, or both, in the State of Florida. SIGNATURE Signatur, specify or thick area of registered agent, or both, in the State of Florida. SIGNATURE Signatur, specify or thick area of registered agent, or both, in the State of Florida. SIGNATURE Signatur, specify or thick area of registered agent, or both, in the State of Florida. SIGNATURE Signatur, specify or thick area of registered agent, or both, in the State of Florida. FLE NOW!!! FEE IS \$150.00 Atter MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State The May 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State Signature and entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Signature agent agent, or both, in the State of Florida. Signature agent agent, or both, in the State of Florida. Signature agent agent, or both, in the State of Florida. Signature agent agent, or both, in the State of Florida. Signature agent agent, or both, in the State of Florida. Signature agent agen		ola, ru		_swasota,				65-0410061		 -		
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HABEN, RALPH H JR 1435 E. PIEDMONT DR, STE. 110 TALLAHASSEE FI, 32312 City FL Zip Code							7. Name and Address of New Registered Agent					
1435 E. PIEDMONT DR., STE. 110 TALLAHASSEE FI. 32312 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, shed or intera rame of vigilations agent and file if deplicable. POTE Registered office or registered agent, or both, in the State of Florida SIGNATURE Signature, shed or intera rame of vigilations agent and file if deplicable. POTE Registered agent, or both, in the State of Florida SIGNATURE Signature, shed or intera rame of vigilations agent and file if deplicable. POTE Registered Agent or registered agent, or both, in the State of Florida Attention of Potential P						Name	-					
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