

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000023105

1. Entity Name

HOME ASSURANCE, INC.

Principal Place of Business

Mailing Address

5727 ANTILLES DRIVE
SARASOTA FL 34231

5727 ANTILLES DRIVE
SARASOTA FL 34231

2. Principal Place of Business

3. Mailing Address

2508 Constitution Blvd.

2508 Constitution Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

SARASOTA, FL.

SARASOTA, FL.

Zip

Country

Zip

Country

34231

U.S.A.

34231

U.S.A.

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

YODER, RUSSELL
5727 ANTILLES DRIVE
SARASOTA FL 34231

Name Russell Yoder

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

2508 Constitution Blvd.

City SARASOTA, FL.

FL

Zip Code 34231

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME YODER, RUSSELL
STREET ADDRESS 5727 ANTILLES DRIVE
CITY-ST-ZIP SARASOTA FL 34231

TITLE Russell Yoder ☒ Change ☐ Addition
NAME
STREET ADDRESS 2508 Constitution Blvd.
CITY-ST-ZIP SARASOTA, FL. 34231

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
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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 an other like empowered.

SIGNATURE:

Russ Yoder

3-14-01

941-925-9885

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

040777

CR25034 (10/00)