2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)				FILED Apr 03, 2003 8:00 am Secretary of State
DOCUMENT # P0000063411 1. Entity Name				04-03-2003 90141 018 ***150.00
CABELL I	NSURANCE & FINANCIAL	SERVICES, INC.		
Principal Place of Business Mailing Address 11 S 7TH ST 11 S 7TH ST FERNANDINA BEACH FL 32034 FERNANDINA BEACH FL 32034			2034	
2. Principal Place of Business 3. Mailing Address			T LEGICLES ALL BRAIN AND ANN AND AND	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES
City & State		City & State		4. FEI Number 59-3660629 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Curren	t Registered Agent	Name	7. Name and Address of New Registered Agent
TOMASSETTI, JEFFREY 406 ASH ST				ss (P.O. Box Number is Not Acceptable)
FERNANDINA BEACH FL 32034			City	Zip Code
	named entity submits this statement fitions of registered agent.	or the purpose of changing its r	egistered office or regi	stered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE .	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE:	Registered Agent signature rec	ulred when reinstating) DATE
After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o	of State		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees
10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CABELL, DAVID M 11 S 7TH ST FERNANDINA BEACH FL 32034	∟ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
indicated of the cor	on this report or supplemental report i	s true and accurate and that my	/ signature shall have t	Section 119.07(3)(i), Florida Statutes. I further certify that the information he same legal effect as if made under oath; that I am an officer or director 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if