2000 UNIFORM BUSINESS REPORT (UBR)

5/16/00-90027-043-$150.00-$150.00

DOCUMENT # P06114

1. Entity Name

INVEST FINANCIAL CORPORATION INSURANCE AGENCY IN

FILED
00 JUN -9 PM 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
2701 N. ROCKY POINT DR. 7TH FLOOR TAMPA FL 33607 US	2701 N. ROCKY POINT DR. 7TH FLOOR TAMPA FL 33607-5917 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 52-1371150 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name: CT CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable): 1200 South PINE ISLAND ROAD

City: PLANTATION FL Zip Code: 33324

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: Vicky Goldstein VICKY GOLDSTEIN SPECIAL ASSISTANT SECRETARY 6-7-00
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, 2000 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO BLAGOJEVICH, ROBERT 2701 N ROCKY POINT DR, 7TH FLOOR TAMPA FL 33607	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ALLEN, C. ROGER 2701 N ROCKY POINT DR, 7TH FLOOR TAMPA FL 33607	☒ Delete	President BLAGOJEVICH, ROBERT 2701 N ROCKY POINT DR, 7th FLOOR TAMPA, FL 33607	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S PRICE, MARY NEIL 2701 N ROCKY POINT DR, 7TH FLOOR TAMPA FL 33607	☑ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WARD, GARY L 2701 N ROCKY POINT DR, 7TH FLOOR TAMPA FL 33607	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT MUNRO, CINDY 2701 N ROCKY POINT DR, 7TH FLOOR TAMPA FL 33607	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS WELCH, PAMELA 400 1ST AMERICAN CENTER NASHVILLE TN 37237	☐ Delete		☐ Change ☐ Addition SP

CR2E034 (9/99)

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 all other like empowered.

SIGNATURE: Cindy A. Munro CINDY MUNRO 4-26-00 (813)289-5460
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #