2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

2185 N. GLENVILLE

P07477 **DOCUMENT #**

1. Entity Name

Principal Place of Business

2185 N. GLENVILLE

CENTRAL SECURITY LIFE INSURANCE COMPANY



FILED Jan 10, 2003 8:00 am Secretary of State 01-10-2003 90106 017 ***150.00

| | AND IN |
|-----|--|
| | |
| | / <i>***</i> **** |
| ı | |
| | MARKET STATE |
| | |
| | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | 12年2月1日 12 ALVIE |
| | (C-401-1-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4 |
| | \.\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |
| | \A\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |
| - 1 | COO WE THE |

| P.O. BOX 833879 RICHARDSON TX 75083-0879 | | P.O. BOX 833879 RICHARDSON TX 75083-0879 | | | | | | |
|---|--|--|-------------------------------|--|--|-----------------------|--|--|
| 21 | Place of Business 75 N. Glenville Pr. | 3. Mailing Address / (| Plenville | Dr. | : | 1001 010H BIBIL BIBIL | ###################################### | |
| Suite Apr | 1 126× 8338/1 | Suito Ant # | 833879 | | CHECK HERE IF MAKING CHANGES | | | |
| City & state / City & state / Kichardson | | | | | 4. FEI Number 75-0916066 | - | Applied For Not Applicable | |
| Zip 75287 Country S. Zip 75287 C | | | | | 5. Certificate of Status Desired | □ \$8.75 Fee Re | 5 Additional equired | |
| ··· . | 6. Name and Address of Current F | Registered Agent | | | 7. Name and Address of New Re | gistered Agent | | |
| EL ODIDA | INCURANCE COMMISSIONES | | Name | | | | | |
| | INSURANCE COMMISSIONER | | Street | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| | ITOL BUILDING | | | ` | | | | |
| MONROE | ₹ ₹.38 | | | | | | | |
| IALLAHA | SSEE FL 32301 | | City | | | FL Zip | Code | |
| B. The above | e named entity submits this statement for | the purpose of changing its r | egistered office | or registere | ed agent, or both, in the State of Flori | ida. I am familiar | with, and accept | |
| rue ópiiða | tions of registered agent. | and the same of th | | | | | | |
| SIGNATURE | | | | | | | | |
| | Signature, typed or printer frame of registered agent an | id title if applicable. (NOTE: | Registered Agent signs | ature required v | vhen reinstating) | DATE | | |
| | ILE NOW!!! FEE IS \$150.00 | | | | 9. Election Campaign Final | naina 4 | ··· | |
| Afte Make Checi | r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of | State | | | Trust Fund Contribution. | | \$5.00 May Be Added to Fees | |
| 10. | ØFFICERS AND D | RECTORS | 11. | | ADDITIONS/CHANGES TO OFFIC | ERS AND DIREC | TORS IN 11 | |
| TITLE | PD G AMELIAN A CONTRACTOR | ☐ Delete | TITLE | | | Cha | | |
| iame Treet address | LEWIS, WILLIAM H. J. 22185 N. GLENVILLE DR. 2 | . * | NAME | 2.75 | N. Glenville Pr. | (all | ress only) | |
| ITY-ST-ZIP | RICHARDSON TX | | STREET ADDRESS CITY-ST-ZIP | 2173 | A Olemanic Al | ζ- | 7 | |
| ITLE | v | Delete | TITLE | - | | | | |
| IAME | COLEMAN, RONALD | Value Delete | NAME | | | ☐ Cha | inge 🗌 Addition | |
| TREET ADDRESS | 2185 N GLENVILLE | | STREET ADDRESS | | | | | |
| ITY-ST-ZIP | RICHARDSON TX | | CITY-ST-ZIP | | | | ļ | |
| ITLE | T | ☐ Delete | TITLE | | | Char | nge Addition | |
| AME | ANDERSON, JIM | | NAME | | N. Glannille Dr. | • | | |
| TREET ADDRESS | 2185 N. GLENVILLE RICHARDSON TX | | STREET ADDRESS | 2175 | N. Cleralite CI. | | ŀ | |
| | | | CITY-ST-ZIP | <u> </u> | | | | |
| TLE AME | SV Burgin, Richard | ☐ Delete | TITLE NAME | | _ | Char | nge 🗌 Addition | |
| TREET ADDRESS | 2185 N GLENVILLE | | STREET ADDRESS | 2175 | N. Glenville Dr. | | | |
| ITY-ST-ZIP | RICHARDSON TX | | CITY-ST-ZIP | | , • | | | |
| TLE | VD | ☐ Delete | TITLE | | | Char | nge 🗌 Addition | |
| AME | LEWIS, JAMES G | | NAME | | W 01 - 11 0 | i Sila | .a | |
| | 2185 N GLENVILLE DRIVE | | STREET ADDRESS | 2175 | N. Glenville Dr. | | | |
| | FRISCO TX 75035 | | CITY-ST-ZIP | | | | | |
| TLE | D I FIANC ANALY D | ☐ Delete | TITLE | | | ☐ Chan | nge 🔲 Addition | |
| | LEWIS, AMY R 12205 BILDIS DRIVE | | NAME OVERET APPRECA | 1 | | | ļ | |
| | FRISCO TX 75035 | | STREET ADDRESS CITY-ST-ZIP | | | | İ | |
| | · · · · · · · · · · · · · · · · · · · | | GITT-ST-ZIF | ľ | | | 1 | |

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 607, 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.

SIGNATURE: _

ASSachment Doc # P07477 70004633

| TITLE: | D M Change D Addition |
|-----------------|---------------------------------------|
| NAME: | - Enange - Addition |
| | Walters, Paralee |
| STREET ADDRESS: | P.O. Box 1182 |
| CITY-ST-ZIP: | Canton, TX 75103 |
| TITLE: | D ☑ Change ☐ Addition |
| NAME: | Welsh, Kayleen L. |
| STREET ADDRESS: | 2175 N Glenville Dr. |
| CITY-ST-ZIP: | Richardson, TX 75082 |
| TITLE: | D □ Change □ Addition |
| NAME: | Earls, Carrie L. |
| STREET ADDRESS: | 23220 County Rd. 448 |
| CITY-ST-ZIP: | Lindale, TX 75771 |
| TITLE: | D |
| NAME: | Donnell, Curtis Ray |
| STREET ADDRESS: | 14850 Quorum Dr., Suite 150 |
| CITY-ST-ZIP: | Dallas, TX 75234 |
| TITLE: | D ☑ Change ☐ Addition |
| NAME: | DeGeeter, Robert E. |
| STREET ADDRESS: | 2929 N. Central Expressway, Suite 200 |
| CITY-ST-ZIP: | Richardson, TX 75080 |

This page was submitted last year, with each individual noted as an "Addition," but was not made a part of the printed Officers and Directors (Section 10) of Central Security Life's UBR for 2003.

Central Security Life assumes that this information is on file, however, and therefore submits the changes as noted.