

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P31892

1. Entity Name

MERRILL LYNCH INSURANCE GROUP SERVICES, INC.

FILED
Jan 23, 2001 8:00 am
Secretary of State

01-23-2001 90005 009 ***150.00

Principal Place of Business

Mailing Address

4804 DEER LAKE DR E
4TH FL
JACKSONVILLE FL 32246
US

P O BOX 44222
#400
JACKSONVILLE FL 32231-4222
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 59-3032659

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

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, 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

TITLE	PCD	<input checked="" type="checkbox"/> Delete
NAME	BORKOWSKI, CHARLES JR	
STREET ADDRESS	4804 DEER LAKE DR E	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	VTD	<input type="checkbox"/> Delete
NAME	BARTOY, TRACY	
STREET ADDRESS	4804 DEER LAKE DR E	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	GILLIS, LINDA	
STREET ADDRESS	4804 DEER LAKE DR E	
CITY-ST-ZIP	JACKSONVILLE FL 32246	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	BOUCHER, ROBERT	
STREET ADDRESS	1414 MAIN ST	
CITY-ST-ZIP	SPRINGFIELD MA	
TITLE	V	<input type="checkbox"/> Delete
NAME	JOYNER, DIANA	
STREET ADDRESS	1414 MAIN ST	
CITY-ST-ZIP	SPRINGFIELD MA	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V/S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	C/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Eileen Dyson	
STREET ADDRESS	4804 Deer Lake Drive, East	
CITY-ST-ZIP	Jacksonville, FL 32246	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TRACY A. BARTOY

1/11/2001

Date

(904) 218-7105

Daytime Phone #

CR2E034 (10/00)

901142

Merrill Lynch Insurance Group Services, Inc.
Document #P31892
FE1#59-3032659
Block 12 (Attachment)

Additions:

Name	Title	Address
Amy L. Ferrero	Vice President	1414 Main Street Springfield, MA 01144-1007
Michael W. Fulks	Vice President	1414 Main Street Springfield, MA 01144-1007
Martha Groet	Vice President	1414 Main Street Springfield, MA 01144-1007
Nancy Krupka	Vice President	4804 Deer Lake Drive, East Jacksonville, FL 32246
Linda Lankowski	Vice President	1414 Main Street Springfield, MA 01144-1007
Patricia O'Donnell	Vice President	1414 Main Street Springfield, MA 01144-1007
Robert Ostrander	Vice President	1414 Main Street Springfield, MA 01144-1007
Shelly Kay Parker	Vice President	1414 Main Street Springfield, MA 01144-1007
Barbara Rigby-Elson	Vice President	4804 Deer Lake Drive, East Jacksonville, FL 32246
Maryanne Schwartz	Vice President	1414 Main Street Springfield, MA 01144-1007
Kelley Woods	Vice President	4804 Deer Lake Drive, East Jacksonville, FL 32246