2001 UNIFORM BUSINESS REPORT (UBR) **FILED** Mar 15, 2001 8:00 am Secretary of State **DOCUMENT # P38034** 1. Entity Name EAGLE INSURANCE COMPANY 03-15-2001 90203 019 ***150.00 Principal Place of Business Mailing Address 999 STEWART AVENUE 7640 SOUTHGATE BLVD. BETHPAGE NY 11714 SUITE #4 633581 NORTH LAUDERDALE FL 33068 LIS 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State ?2-0824880~ Not Applicable 32 - QB \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FLORIDA INSURANCE COMMISSIONER Street Address (P.O. Box Number is Not Acceptable) CAPITOL BLDG. TALLAHASSEE FL 32301 Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition □ Delete TITLE TITLE NAME NAME WALLACH, WILLIAM STREET ADDRESS STREET ADDRESS 3730 INVERRARY DR. CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL 33319 ☐ Addition Change C Delete TITLE V/D TITLE NAME WALLACH, ROBERT M. NAME STREET ADDRESS STREET ADDRESS 219 FEEKS LN CITY-ST-ZIP CITY-ST-ZIP MILL NECK NY 11765 ☐ Change ★ Addition Detete TITLE TITLE NAME Hylan T. Hubbard, III ISAACS, LAWRENCE S. NAME STREET ADDRESS STREET ADDRESS 999 Stewart Avenue 31 CEDAR DR. CITY-ST-ZIP CITY-ST-7IP Bethpage, NY 11714 DANBURY CT 06810 ☐ Addition ★ Change ☐ Delete TITLE v/d TITLE NAME NAME REIERSEN, JOHN D. STREET ADDRESS 416 OAKWOOD RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PORT JEFFERSON NY 11777 Change ☐ Addition

Bethpage, NY 11714 LAUDERHILL FL 33319 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 eath; 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.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

V/T

SIGNATURE:

D

NEZAMOODEEN, PHILBERT

EAST ROCKAWAY NY 11518

38 ROOSEVELT AVENUE

WALLACH, FRANCES

3730 INVERRARY DRIVE

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT Reiersen

☐ Delete

Delete

Jasper J. Jackson

999 Stewart Avenue

516) 393-4006

Addition

[] Change

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EAGLE INSURANCE COMPANY 2001 UNIFORM BUSINESS REPORT

LIST OF ADDITIONAL OFFICERS AND DIRECTORS

Lisa Grapek Drillich 999 Stewart Avenue Bethpage, NY 11714 Director

Harriett Kelley 9917 Gerald North Hills, CA 91343 Vice President

Marie J. Grossman 10 Eckert Road Mt. Holly, NJ 08060 Vice President

Kenneth J. Karasinski 999 Stewart Avenue Bethpage, NY 11714 Vice President and Director