~2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P92000010473

HIS INSURANCE AGENCY OF FLORIDA, INC.

Principal Place of Business	Mailing Address
284 SOUTH UNIVERSITY DRIVE PLANTATION FL 33324 US	820 GESSNER SUITE 1000 HOUSTON TX 77024-4259 US

FILED Jan 13, 2000 8:00 am Secretary of State 01-13-2000 90030 021 ***158.75

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2. Principal Pi	ace of Business	3. Mailing Address								
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		-			DO NOT WR	ITE IN THIS	SPACE	
City & State City & State				4. FEI Number 74-26			74-266532	8		pplied For lot Applicable
Zip	Country	Zip	Count	ry	5. (Certificate	of Status Desired	[3]	\$8.75 Ad Fee Require	
	6. Name and Address of Current F	Registered Agent			7. 1	Name and	Address of New	Registered	Agent	
				Name					-	
MANG, DOUGLAS A 660 E JEFFERSON ST				Street Address (P.O. Box Number is Not Acceptable)						
-	AHASSEE FL 32301		ļ	City				FL	Zip Cod	de
8. The above	named entity submits this statement for	the purpose of changing its	registere	d office or	registered ag	ent, or botl	n, in the State of Fl	orida.		
SIGNATURE _	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	E: Registered	Agent signatu	re required when re	einstating)		DATE		
2 This same	ration is aligible to action its Intensible	FILE NOW!	III EEE	IS \$150 (10					
	ration is eligible to satisfy its Intangible equirement and elects to do so.	After MAY 1, 20					ction Campaign Fi	-		00 May Be
(See criteria on back)		Make Check Payable to Department of Sta			l Iru	st Fund Contribution	on. L	-ــ Adde	ed to Fees	
11.	OFFICERS AND I	DIRECTORS	12.		AD	DITIONS/	CHANGES TO OF	FICERS AN	D DIRECTOR	RS IN 11
	D/P	□ Delete	TITLE				President		Change	XX Addition
TITLE NAME	-,-	□ Delete	NAME				V. Preste		CT Ondrigo	38717
STREET ADDRESS	GALTNEY, WILLIAM F JR			ET ADDRESS	284 50	ophei uth Ur	niversity	Drive		
CITY-ST-ZIP	820 GESSNER #1000			ST-ZIP			Florida	33324		
	HOUSTON TX 77024-4259				rianta	<u> </u>	i io <u>i</u> iua	33327	Change	Addition
TITLE	STVP	☐ Delete	TITLE	1			•		Change	Madition
NAME	MOORE, JOE L.,		NAME							
STREET ADDRESS	820 GESSNER, STE. 1000			ET ADDRESS						ł
CITY-ST-ZIP	HOUSTON TX 77024		CITY-	ST-ZIP						
TITLE	SVP	☐ Delete	TITLE						Change	☐ Addition
NAMÉ	DENNIS BARTLETT		. NAME							
STREET ADDRESS	284 S UNIVERSITY DR		STREE	ET ADDRESS						,]
CITY-ST-ZIP	PLANTATION FL 33324		CITY-	ST-ZIP						
TITLE		☐ Delete	TITLE						Change	☐ Addition
NAME			NAME							
STREET ADDRESS			STREE	ET ADORESS						
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NAME STREET ADDRESS				ET ADDRESS						
CITY-ST-ZIP				ST-ZIP						
						110.0=:=:		1.5 met	- 116 - 115 - 1 - 15	information.
 13. I hereby of indicated 	ertify that the information supplied with on this report or supplemental report is	tnis tiling does not qualify for true and accurate and that n	r της exer ny signat	mption stat ure shall ha	ed in Section ave the same	⊤19.07(3)(legal effec	rj, Hiorida Statutes t as if made under	. i further ca oath; that I	am an office	er or director

of the corporation or the receive for 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 no address, with all other like empowered.

SIG	N	A1	ΓU	IR	E:

િંસિંગોનિંam Fi Galtney, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/2000

(713) 461-4000

Daytime Phone #