FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000040256 1. Corporation Name

UNISYN PROPERTY AND CASUALTY, INC.

Principal Flace	O Dusiness	Maining Address				1				
	NE ISLAND ROAD	1200 SOUTH PINE ISLAND ROAD								
SUITE 100	00010	SUITE 100				DO NOT WRITE IN THIS SPACE				
PLANTATION FL US	. 33312	US	PLANTATION FL 33312			3. Date Incorporated or Qualifed				
00		00				06/07/1993				ł
		1 Co. Marillan Address				4. FEI Number	· ·	$\overline{}$	Applie	ed For
	ace of Business	2a. Mailing Address	⊢ •				Not Applicable			
21		26				65-0417139		\$0.7	5 Add	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired_	□ -		Requ	
22		27 City 8 State								
City & State		City & State	<u>├</u> ~¬ '			6. Election Campaign Financing			00 Ma led to F	
23		28	<u> </u>			Trust Fund Contribution	luka		eu <u>io i</u>	
Zip :¬	Country	Zip				8. This corporation owes the current year Intangible Personal Property Tax Personal Property Tax				
24	25					Personal Property Tax. Lyes Lyes 10. Name and Address of New Registered Agent				
	9. Name and Address of Curre	nt Registered Agent	- 	11 N	Name	(U. Name and Address of New	negisteres A	gun		
SUN!	MEIGED LADDY R		"	`` '`	Ta llie					
SCHWEIGER, LARRY B 1200 S PINE ISLAND RD, #100			82 Street A		Street Addre	ess (P.O. Box Number is Not Accept	table)			
PLAN	ITATION FL 33324		ļŧ	33						
			8	4 c	City			85	Zip Cod	de
i			T	1 -	-		<u> </u>	LL.		
11. Pursuant i	to the provisions of Sections 607.050 egistered agent of both in the State	2 and 607.1508, Florida Statutes	, the abo	ve-n	amed corp	oration submits this statement for the	e purpose of o	hanging	g its re	gistered tered
office or re agent. Lar	egistered agent or bory in the State m familiar with and accept the oblig	of Florida, Such change was autations of, Section 607.0505, Florid	la Statut	oy une es.	s corporanc	oration submits this statement for the on's board of directors. I hereby acce	princippon.			
, *	1 1912 47						3/30/0	79		
SIGNATURE	Signature, typed or printed name of registered age	int and title if applicable. (NOTE: R	egistered A	gent sig	gnature required	d when reinstating)	ME	7_		
12.	OFFICERS AI	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FFICERS AND			
TITLE	D	☐ DELETE	1.1 TITLE	E				Cha	nge	☐ Addition
NAME	SCHWEIGER, LARRY B		1.2 NAM							
STREET ADDRESS 1200 SOUTH PINE ISLAND ROAD,		DAD, SUITE 100	1.3 STREET ADDRESS		DRESS					
CITY-ST-ZIP	PLANTATION FL		1.4 CITY	-ST-ZI	JP					
TITLE	D	☐ DELETE	2.1 TITLE	 E				Chai	nge	☐ Addition
NAME	-		2.2 NAM	2.2 NAME						
STREET ADDRESS	THE COLUMN PURE TO THE DOLL OF THE TOP			EET AD	OORESS					
CITY-ST-ZIP PLANTATION FL			2.4 CITY-ST-ZIP			` -		•		
TITLE				3.1 TITLE				Cha	nge	Addition
NAME			3.2 NAM		İ					1
i I			3.3 STRI		JUDE66		,			
STREET ADDRESS	•		3.4. CITY			£ .				
CITY-ST-ZIP		☐ DELETE	4.1 TITL		- I			[] Cha	nae	Addition
TITLE 1		- Detecte	•			•				
NAME	· 		4. 2 NAM			•				
STREET ADDRESS			4.3 STRI		1					
CITY-ST-ZIP		C ACLES	4.4 CITY		<u>IP</u>		 	Cha		Addition
l TITLE	•	☐ DELETE .	5.1 TITL				• •	[] Clia	nge	☐ Addition
NAME			5.2 NAM			- ,				
STREET ADDRESS		•	5.3 STR							
CITY-ST-ZIP			5.4 CITY	_	JP					
ππε		☐ DELETE	6.1 TITL		1			Cha	nge	☐ Addition
NAME			6.2 NAM		ļ					
STREET ADDRESS		•	6.3 STR	EET AD	ORESS	•	•			

SIGNATURE:

CITY-ST-ZIP

14. 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 annual report of suppliemental annual 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 opporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed of the attachment with an address, with all other like empowered.

FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90045 038 ***150.00