

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000058373

FILED  
Jan 12, 2005  
Secretary of State

Entity Name: GARY MARKEL SURPLUS LINES BROKERAGE, INC.

## Current Principal Place of Business:

1901 ULMERTON RD  
SUITE 700  
CLEARWATER, FL 33762

## New Principal Place of Business:

15950 BAY VISTA DRIVE  
SUITE 250  
CLEARWATER, FL 33760

## Current Mailing Address:

PO BOX 17269  
CLEARWATER, FL 33762

## New Mailing Address:

FEI Number: 59-3196889      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MARKEL, GARY L  
1901 ULMERTON RD  
SUITE 700  
CLEARWATER, FL 33762 US

## Name and Address of New Registered Agent:

MARKEL, GARY L  
15950 BAY VISTA DRIVE  
SUITE 250  
CLEARWATER, FL 33760 US

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: GARY L. MARKEL

01/12/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTS ( ) Delete  
Name: MARKEL, GARY L  
Address: 1901 ULMERTON RD, STE 700  
City-St-Zip: CLEARWATER, FL 33762

Title: EVP ( ) Delete  
Name: ROSS, PAULA  
Address: 1901 ULMERTON ROAD, SUITE 7000  
City-St-Zip: CLEARWATER, FL 33762

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change ( ) Addition  
Name: MARKEL, GARY L  
Address: 15950 BAY VISTA DRIVE, SUITE 250  
City-St-Zip: CLEARWATER, FL 33760

Title: EVP (X) Change ( ) Addition  
Name: ROSS, PAULA L  
Address: 15950 BAY VISTA DRIVE, SUITE 250  
City-St-Zip: CLEARWATER, FL 33760

Title: AVP ( ) Change (X) Addition  
Name: SULLIVAN, MICHAEL  
Address: 15950 BAY VISTA DRIVE, SUITE 250  
City-St-Zip: CLEARWATER, FL 33760

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAULA L. ROSS

EVP

01/12/2005

Electronic Signature of Signing Officer or Director

Date