2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # **P93000064435** Apr 28, 2000 8:00 am Secretary of State **BROWN & BROWN HOLDING COMPANY** 04-28-2000 90460 001 *1,650.00 Mailing Address Principal Place of Business 40 AUDUSSON AVENUE 40 AUDUSSON AVENUE PENSACOLA FL 32507 PENSACOLA FL 32507-2426 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3282648 Not Applicable Country **\$8.75** Additional Zio Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BROWN, WARREN T Street Address (P.O. Box Number is Not Acceptable) **40 AUDUSSON AVENUE** PENSACOLA FL 32507 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so: After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Addition NP Change ☐ Delete TITLE TITLE **BROWN, WARREN T** NAME NAME STREET ADDRESS STREET ADDRESS **40 AUDUSSON AVENUE** CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32507 ☐ Change ☐ Addition ☐ Delete TITLE TITLE BROWN, S.J. NAME NAME **40 AUDUSSON AVENUE** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 32507 CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE BRYAN, SHIRLEY F NAME NAME **40 AUDUSSON AVENUE** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32507 ☐ Change Addition ☐ Delete TITLE TITLE BRYAN, GARY W NAME NAME STREET ADDRESS 40 AUDUSSON AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP PENSACOLA FL 32507 ☐ Change ☐ Addition TITLE TITLE ☐ Delete BRYAN, W H NAME NAME STREET ADDRESS **40 AUDUSSON AVENUE** STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP PENSACOLA FL 32507 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 oath; that I am an officer or director of the corporation or the receiver or trusted 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 anadress, with all other like empowered.

BROWN

SIGNATURE:

MARREN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR