

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000002512

FILED
Jan 09, 2003
Secretary of State

Entity Name: JOHN SINIBALDI INSURANCE, INC.

Current Principal Place of Business:

5401 110TH WAY N
SEMINOLE, FL 33772 US

New Principal Place of Business:

5401 110TH WAY
SEMINOLE, FL 33772 US

Current Mailing Address:

5401 110TH WAY N
SEMINOLE, FL 33772 US

New Mailing Address:

5401 110TH WAY
SEMINOLE, FL 33772 US

FEI Number: 59-3346970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SINIBALDI, JOHN
5401 110TH WAY NORTH
SEMINOLE, FL 34642 US

Name and Address of New Registered Agent:

SINIBALDI, JOHN
5401 110TH WAY
SEMINOLE, FL 33772 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:

01/09/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SINIBALDI, JOHN
Address: 5401 110TH WAY NORTH
City-St-Zip: SEMINOLE, FL 33772

Title: V () Delete
Name: SINIBALDI, LENORE
Address: 5401 110TH WAY NORTH
City-St-Zip: SEMINOLE, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SINIBALDI, JOHN
Address: 5401 110TH WAY
City-St-Zip: SEMINOLE, FL 33772

Title: V (X) Change () Addition
Name: SINIBALDI, LENORE
Address: 5401 110TH WAY
City-St-Zip: SEMINOLE, FL 33772

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: LENORE SINIBALDI

V

01/09/2003

Electronic Signature of Signing Officer or Director

Date