

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000046207

1. Entity Name

FLORIDA SELECT INSURANCE COMPANY

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90003 018 ***150.00

Principal Place of Business

Mailing Address

1819 MAIN STREET
SUITE 700
SARASOTA FL 34236

P.O. BOX 49768
SARASOTA FL 34230-6768

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3390361

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

INSURANCE COMMISSIONER
THE CAPITOL
TALLAHASSEE FL 32399

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	KORDUCKI, STEPHEN A	ONE CHASE MANHATTAN PLAZA, 44TH FL	NEW YORK NY 10005	<input type="checkbox"/>
D	WASSERMAN, DAVID L	14 CABRIOLET LANE	MELVILLE NY 11747	<input type="checkbox"/>
V	COTE, J	1680 FRUITVILLE RD, STE 404	SARASOTA FL 34236	<input type="checkbox"/>
D	WATKINS, DAVID	500 5TH AVE., SUITE 440	NEW YORK NY 10110	<input type="checkbox"/>
P	FITZPATRICK, JOHN H	1400 AMERICAN LANE, 12TH FLOOR	SCHAUMBURG IL 60173	<input type="checkbox"/>
VT	ESPINO, RICARDO A	1819 MAIN ST., SUITE 700	SARASOTA FL 34236	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		See attached			
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 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 an address, with all other like empowered.

SIGNATURE

Ricardo A. Espino

Ricardo A. Espino, VP & Treasurer 4/25/2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

941-906-2261

CR2E034 (9/99)

Florida Select Insurance Company
2000 Uniform Business Report
FEIN 59-3390361

ADA
DUELESON
D/A. P96 0004627

Section 11 should appear as follows:

Title	D
Name	Fitzpatrick, John H.
Street	Guggerstrasse 20 CH-8702
City, ST Zip	Zollikon, SW CH-8702

Title	D
Name	Wasserman, David L.
Street	14 Cabriolet Lane
City, ST Zip	Melville, NY 11747

Title	D, P
Name	Korducki, Stephen A.
Street	6458 City West Parkway - Suite 122
City, ST Zip	Eden Prairie, MN 55344

Title	D
Name	Richards, John G.
Street	One PMSC Center, US 21 N
City, ST Zip	Blythewood, SC 29016

Title	D
Name	Watkins, David J.
Street	500 5th Ave., Suite 440
City, ST Zip	New York, NY 10110

Title	V
Name	Lefler, W. Michael
Street	1819 Main St. - Suite 700
City, ST Zip	Sarasota, FL 34236

Title	V, T
Name	Espino, Ricardo A.
Street	1819 Main St. - Suite 700
City, ST Zip	Sarasota, FL 34236

Title	V, S
Name	Krouse, Mitchel J.
Street	1819 Main St. - Suite 700
City, ST Zip	Sarasota, FL 34236

Title	V
Name	Cote, John A.
Street	1819 Main St. - Suite 700
City, ST Zip	Sarasota, FL 34236