

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000046207

1. Entity Name

FLORIDA SELECT INSURANCE COMPANY

FILED
May 01, 2001 8:00 am
Secretary of State

05-01-2001 90038 045 ***150.00

Principal Place of Business

C/O PANZA, MAURER, ET. AL.
215 SOUTH MONROE STREET #320
TALLAHASSEE FL 32301

Mailing Address

P.O. BOX 49768
SARASOTA FL 34230

2. Principal Place of Business

1819 Main Street

Suite, Apt. #, etc.

Suite 700

3. Mailing Address

Suite, Apt. #, etc.

City & State

Sarasota, FL

City & State

Zip

34236

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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, 2001 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

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MIZEL, ADAM M	
STREET ADDRESS	100 WEST 89TH STREET #PH5	
CITY-ST-ZIP	NEW YORK NY 10024	
TITLE	D	<input type="checkbox"/> Delete
NAME	WASSERMAN, DAVID L	
STREET ADDRESS	14 CABRIOLET LANE	
CITY-ST-ZIP	MELVILLE NY 11747	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	G. TERRANCE VAN GILDER	
STREET ADDRESS	1864 DORIS DRIVE	
CITY-ST-ZIP	MENLO PARK CA 94025	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	G. THOMPSON HUTTON	
STREET ADDRESS	2 SANTIAGO AVENUE	
CITY-ST-ZIP	ATHERTON CA 94027	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	KARL, FREDERICK B	
STREET ADDRESS	859 SEDDON COVE WAY	
CITY-ST-ZIP	TAMPA FL 33602	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ricardo A. Espino, Vice President

4/26/01

941-906-2261

Date

Daytime Phone #

CR2E034 (10/00)

Attachment

964706

Doc. # 96000046207

Florida Select Insurance Company
 2001 Uniform Business Report
 FEIN 59-3390361

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	Smith, Jane S.
Street	One PMSC Center, US 21 North
City, ST Zip	Blythewood, SC 29016

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

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

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

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

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