

2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

04 MAR 12 AM 7:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000074680

1. Entity Name
HIGH MARK INSURANCE AND FINANCIAL SERVICES,
INC.



Principal Place of Business
500 S FLORIDA AVE,
4TH FLOOR
LAKELAND, FL 33801

Mailing Address
500 S FLORIDA AVE,
4TH FLOOR
LAKELAND, FL 33801



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02272004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

59-3465248

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SANCHEZ JR, HENRY
500 SOUTH FLORIDA AVENUE
SUITE 400
LAKELAND, FL 33801

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
JOHN PENNACHIO ☐ Delete
500 S FLORIDA AVE, 4TH FLOOR
LAKELAND, FL 33801

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
JOHN B HART ☐ Delete
500 S FLORIDA AVE, 4TH FLOOR
LAKELAND, FL 33801

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
MARK R WELLS ☐ Delete
500 S FLORIDA AVE, 4TH FLOOR
LAKELAND, FL 33801

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T/O
WISEMAN, KENNETH ☐ Delete
500 S FLORIDA AVE, 4TH FLOOR
LAKELAND, FL 33801

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPSD
SANCHEZ, HENRY JR ☐ Delete
500 S FLORIDA AVE, 4TH FLOOR
LAKELAND, FL 33801

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
900030671069
03/17/04--01057--003 **\$61.25

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
CHAND JI ARELLANO ☐ Change ☒ Addition
540 FRONTAGE ROAD
NORTHFIELD, FL. 60093

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: HENRY SANCHEZ JR. V.P. Henry Sanchez Jr.

2/27/04 863-577-1910 X826

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #