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2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with

SIGNATURE:

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GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ke empowered.

Patrick E. Durkin-V.P. 4/2/01

Daytime Phone #

Apr 06, 2001 8:00 am Secretary of State DOCUMENT # P98000095668 FLORIDA PREFERRED INSURANCE, INC. 04-06-2001 90066 021 ***150.00 Principal Place of Business Mailing Address 4651 SHERIDAN ST. #355 4651 SHERIDAN ST. #355 HOLLYWOOD FL 33621 HOLLYWOOD FL 33021 2. Principal Place of Business 3. Mailing Address 4016 N. 46th <u>Ave</u>. <u>4016 N. 46th Ave</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For 68-0867205 Hollywood, FL33021 33021 Hollywood, FLNot Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33021 Fee Required Broward 33021 Broward 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BULFIN, ROBERT M Street Address (P.O. Box Number is Not Acceptable) 2826 E OAKLAND PARK BLVD. SUITE 200 FT. LAUDERDALE FL 33306 Zip Code City FI 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so, After MAY 1, 2001 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete ★ Change ☐ Addition CR2E034 (10/00) TITLE TITLE D NAME NAME COONEY, KEVIN J Cooney, Kevin J. STREET ADDRESS STREET ADDRESS 4651 SHERIDAN ST. #355 4016 N. 46th AVe. CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 Hollywood, FL 33021 ☐ Delete ☐ Change TITLE TITLE Patrick E. Durkin-V.P. NAME NAME 4016 N. 46th AVe. STREET ADDRESS STREET ADDRESS Hollywood, FL 33021 CITY-ST-ZIP CITY-ST-ZIP -TITLE- -- --- - Delete TITLE* ----Change ~ [7] Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition 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 reports 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 distance to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if