

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
Feb 10, 2003 8:00 am  
Secretary of State

02-10-2003 90223 038 \*\*\*150.00

DOCUMENT # P98000103909



1. Entity Name  
PETERSEN GENERAL AGENCY, INC.

Principal Place of Business  
1108 AIRPORT  
A  
PENSACOLA FL 32504

Mailing Address  
1108 AIRPORT  
A  
PENSACOLA FL 32504



2. Principal Place of Business  
7282 Plantation RD  
Suite/Apt. #, etc.  
403

3. Mailing Address  
7282 Plantation RD  
Suite, Apt. #, etc.  
403

CHECK HERE IF MAKING CHANGES

City & State  
Pensacola FLA

City & State  
Pensacola FL

4. FEI Number 59-3550030 Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

Zip 32504 Country Escambia Zip 32504 Country Escambia

6. Name and Address of Current Registered Agent  
PETERSEN, RANDALL  
540 MILESTONE BOULEVARD 3991 Stefani RD  
CANTONMENT FL 32533

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

SIGNATURE *Randall* DATE 1-7-03

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**  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

| 10. OFFICERS AND DIRECTORS                     |  | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |   |
|--|--|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>PETERSEN, RANDALL<br>1108 AIRPORT BLVD STE-A<br>PENSACOLA FL 32504<br>7282 Plantation RD #403 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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 reports 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: *Randall* SIGNATURE REQUIRED  
Date 2/5/03 Daytime Phone # 850 494-1422

CR2E034 (10/02)