

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2001 8:00 am
Secretary of State

03-12-2001 90392 001 ***150.00
 03-12-2001 90392 002 *****8.75

DOCUMENT # P99000020520

1. Entity Name

AmSERV, Inc. ✓

Principal Place of Business

C/O AmCOMP INCORPORATED
 701 U.S. HIGHWAY ONE
 SUITE 200
 NORTH PALM BEACH, FL 33408

Mailing Address

C/O AmCOMP INCORPORATED
 701 U.S. HIGHWAY ONE
 SUITE 200
 NORTH PALM BEACH, FL 33408

30047

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0915202

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

Name

GEORGE E. HARRIS

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

HARRIS & HELGESEN

11380 PROSPERITY FARMS ROAD, SUITE 201

City

PALM BEACH GARDENS

FL

Zip Code

33410

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)

02/27/01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	FRED R. LOWE	
STREET ADDRESS	701 U.S. HIGHWAY ONE, SUITE 200	
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408	
TITLE	PD	<input type="checkbox"/> Delete
NAME	DEBRA CERRE-RUEDISILI	
STREET ADDRESS	701 U.S. HIGHWAY ONE, SUITE 200	
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408	
TITLE	V	<input type="checkbox"/> Delete
NAME	LAURA NEWSTEAD	
STREET ADDRESS	701 U.S. HIGHWAY ONE, SUITE 200	
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408	
TITLE	VT	<input type="checkbox"/> Delete
NAME	DONALD L. JOHNSON	
STREET ADDRESS	701 U.S. HIGHWAY ONE, SUITE 200	
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408	
TITLE	S	<input type="checkbox"/> Delete
NAME	MELODY A. MISIASZEK	
STREET ADDRESS	701 U.S. HIGHWAY ONE, SUITE 200	
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408	
TITLE	V	<input type="checkbox"/> Delete
NAME	VALERIE WILSON	
STREET ADDRESS	701 U.S. HIGHWAY ONE, SUITE 200	
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408	

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

MELODY A. MISIASZEK

Date

800-226-1898 x 11226

Daytime Phone # 11226

CR2E034 (11/00)

Attachment
PA 9000020520

11. OFFICERS AND DIRECTORS (Continued)

V

Antonio Faillaci
701 U.S. Highway One, Suite 200
North Palm Beach, FL 33408

V

Al Duggan
701 U.S. Highway One, Suite 200
North Palm Beach, FL 33408

V

Timothy J. Spear
701 U.S. Highway One, Suite 200
North Palm Beach, FL 33408