

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000032539

1. Entity Name

CLARION SURETY SERVICES, INC.

Principal Place of Business

6000 SOUTHWEST 13TH STREET
PLANTATION FL 33317

Mailing Address

6000 SOUTHWEST 13TH STREET
PLANTATION FL 33317

2. Principal Place of Business

1820 N. UNIVERSITY DR.

Suite, Apt. #, etc.

3. Mailing Address

P O BOX 17557

Suite, Apt. #, etc.

City & State

PLANTATION, FLORIDA

City & State

PLANTATION, FL

Zip

33322

Country

USA

Zip

33318

Country

USA

4. FEI Number

65-0972452

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

GEORGE, JOHN G ESQ
409 SOUTHEAST SEVENTH STREET
FORT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name
MICHAEL H. BURTON
Street Address (P.O. Box Number is Not Acceptable)
1820 N. UNIVERSITY DRIVE
City **PLANTATION** FL Zip Code **33322**

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 **MICHAEL H. BURTON**

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

(NOTE: Registered Agent signature required when reinstating)

APRIL 16, 2001

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** ☐ Delete
NAME **BURTON, MICHAEL**
STREET ADDRESS **6000 SOUTHWEST 13TH STREET**
CITY-ST-ZIP **PLANTATION FL 33317**

TITLE **D** ☒ Delete
NAME **BURTON, LINDA**
STREET ADDRESS **6000 SOUTHWEST 13TH STREET**
CITY-ST-ZIP **PLANTATION FL 33317**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

TITLE ☐ Change ☐ 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 **MICHAEL H. BURTON**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 16, 2001 (954)423-2311

Date

Daytime Phone #

FILED
Apr 20, 2001 8:00 am
Secretary of State

04-20-2001 90026 035 ***158.75

952416



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)