

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 90279 035 \*\*\*150.00

**DOCUMENT # P99000060560**

1. Entity Name  
**FLORIDA CHARTERED INSURANCE GROUP, INC.**



Principal Place of Business  
**980 N. COUNTY ROAD 427  
LONGWOOD FL 32750-3012**

Mailing Address  
**980 N. COUNTY ROAD 427  
LONGWOOD FL 32750-3012**

11018766



2. Principal Place of Business  
**980 N. RONALD REAGAN BLVD.**

3. Mailing Address  
**980 N. RONALD REAGAN BLVD.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State  
**LONGWOOD, FL**

City & State  
**LONGWOOD, FL**

4. FEI Number  
**59-3590656**

Applied For  
☐ Not Applicable

Zip  
**32750-3012**

Country

Zip  
**32750-3012**

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**

**TONEY, KENNETH R  
980 N. COUNTY RD. 427 RONALD REAGAN BLVD.  
SUITE 130  
LONGWOOD FL 32750 - 3012**

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 **Kenneth R. Toney**  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**4/24/03**  
DATE

**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 NAME STREET ADDRESS CITY-ST-ZIP	DV TONEY, KENNETH R 980 N. COUNTY RD 427 LONGWOOD FL 32750-3012	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TONEY, MICHELE C 980 N. COUNTY RD. 427 LONGWOOD FL 32750-3012	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CINTRON, DOLORES M 980 N. COUNTY RD. 427 LONGWOOD FL 32750-3012	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>980 N. RONALD REAGAN BLVD. LONGWOOD, FL. 32750-3012</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>980 N. RONALD REAGAN BLVD. LONGWOOD, FL. 32750-3012</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>980 N. RONALD REAGAN BLVD. LONGWOOD, FL. 32750-3012</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **Kenneth R. Toney**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/24/03**  
Date

Daytime Phone #

CR2E034 (10/02)