

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000111812

1. Entity Name
SUMMIT HOLDING GROUP, INC.



FILED

03 JUL -9 PM 12:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
25 FIFTH AVENUE
INDIATLANTIC, FL 32903

Mailing Address
25 FIFTH AVENUE
INDIATLANTIC, FL 32903

2. Principal Place of Business

980 North Federal Highway

Suite, Apt. #, etc.
Ste 310

City & State
Boca Raton, FL

Zip Country
33432 USA

3. Mailing Address

980 North Federal Highway

Suite, Apt. #, etc.
Ste 310

City & State
Boca Raton, FL

Zip Country
33432 USA



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

59-3623448

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PARKER, RICHARD
25 FIFTH AVENUE
INDIATLANTIC, FL 32903

7. Name and Address of New Registered Agent

Name
Marshall T. Leeds

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

980 North Federal Highway, Ste 310

City Boca Raton FL Zip Code 33432

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

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

(NOTE: Registered Agent signature required when resigning)

DATE

7/7/03

FILE NOW! FEE IS \$50.00
After May 1, 2003 fee will be \$60.00
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

TITLE CP
NAME PARKER, RICHARD
STREET ADDRESS 25 FIFTH AVENUE
CITY-ST-ZIP INDIATLANTIC, FL 32903 ☒ Delete

TITLE ST
NAME CAULFIELD, MARK
STREET ADDRESS 25 FIFTH AVE
CITY-ST-ZIP INDIATLANTIC, FL 32903 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CEO/C
NAME LEEDS, MARSHALL
STREET ADDRESS 980 NORTH FEDERAL HIGHWAY, STE 310
CITY-ST-ZIP BOCA RATON, FL 33432 ☐ Change ☒ Addition

TITLE V/D
NAME JACOB S. STEVEN
STREET ADDRESS 980 NORTH FEDERAL HIGHWAY, STE 310
CITY-ST-ZIP BOCA RATON, FL 33432 ☐ Change ☒ Addition

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

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

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

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (10/02)