

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S84410

1. Entity Name

FLORIDA SPECIALTY INSURANCE UNDERWRITERS, INC.

FILED
Feb 06, 2001 8:00 am
Secretary of State

02-06-2001 90256 041 ***150.00

Principal Place of Business

15175 EAGLE NEST LANE
SUITE 105
MIAMI LAKES FL 33014
US

Mailing Address

851 NORTH DONNELLY ST
MOUNT DORA FL 32757
US

2. Principal Place of Business

3. Mailing Address

15175 EAGLE NEST LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 105

City & State

City & State
MIAMI LAKES, FL

4. FEI Number 65-0302903

Applied For

Not Applicable

Zip

Country

Zip

Country

33014

USA

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

DAVIS, JOHN P JR.
851 N DONNELLY ST
MOUNT DORA FL 32757

Name

GREGORY SKINNER

Street Address (Do not include P.O. boxes)

10199 SOUTHSIDE BLVD

SUITE 200

City

JACKSONVILLE

FL

Zip Co

32256

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

Gregory Skinner

02/01/01

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

(NOTE: Registered Agent signature required when reinstating)

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
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
DAVIS, JOHN P JR
15175 EAGLE NEST LANE
MIAMI LAKES FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
B. MATTHEW PETCOFF
28819 FRANKLIN ROAD
SOUTHFIELD, MI 48034 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DST
DAVIS, HARRIETT H
15175 EAGLE NEST LANE
MIAMI LAKES FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JOHN H. BERRY
28819 FRANKLIN ROAD
SOUTHFIELD, MI 48034 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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

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:

J. H. Berry

JOHN H. BERRY

01/30/01

(248) 358-1171

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

0051138