2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704933

FILED Apr 26, 2011 Secretary of State

Entity Name: FLORIDA INSURANCE COUNCIL, INC.

Current Principal Place of Business: New Principal Place of Business:

2888 REMINGTON GREEN LANE

SUITE A

TALLAHASSEE, FL 32308 US

Current Mailing Address: New Mailing Address:

P O BOX 13686

TALLAHASSEE, FL 323173686 US

FEI Number: 59-0996633 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARVIN, III, GUY PEARCE, CECIL

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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: CECIL PEARCE 04/26/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: ETERNO, MARIANNE
Address: 1275 MILWAUKEE AVENUE
City-St-Zip: GLENVIEW, IL 60025

Title: S

Name: GEIGER, BILL

Address: 570 CARILLON PARKWAY

City-St-Zip: ST. PETERSBURG, FL 33716-120

Title: PC

Name: TRAFTON, JAMES

Address: 315 S. CALHOUN STREET, SUITE 850

City-St-Zip: TALLAHASSEE, FL 32301

Title: CE

Name: CORRIGAN, PETER

Address: 1301 RIVERPLACE BOULEVARD, SUITE 1700

City-St-Zip: JACKSONVILLE, FL 32207

Title: C

Name: SPRING, HARRY

Address: 106 E. COLLEGE AVENUE, SUITE 650

City-St-Zip: TALLAHASSEE, FL 32301

Title: PRES

Name: PEARCE, CECIL

Address: 2888 REMINGTON GREEN LANE, SUITE A

City-St-Zip: TALLAHASSEE, FL 32308

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CECIL PEARCE PRES 04/26/2011