2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008611

Entity Name: FRANK WINSTON CRUM INSURANCE, INC.

FILED Apr 30, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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100 S. MISSOURI AVE. CLEARWATER, FL 33756

Current Mailing Address: New Mailing Address:

100 S. MISSOURI AVE. CLEARWATER, FL 33756

FEI Number: 06-1683641 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CHIEF FINANCIAL OFFICER P.O. BOX 6200 32314-6200 200 E. GAINES ST. TALLAHASSEE, FL 32399 US

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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DVT

Name: CARR, JAMES M Address: 100 S MISSOURI AVENUE

City-St-Zip: CLEARWATER, FL 33756

Title: CS

Name: CRUM, FRANK W JR
Address: 100 S MISSOURI AVENUE
City-St-Zip: CLEARWATER, FL 33756

Title: DV

Name: CRUM, MATTHEW C
Address: 100 S MISSOURI AVENUE
City-St-Zip: CLEARWATER, FL 33756

Title: [

Name: MEEK, JOHN H JR
Address: 100 S MISSOURI AVENUE
City-St-Zip: CLEARWATER, FL 33756

Title:

Name: DIXON, JOHN R

Address: 100 S MISSOURI AVENUE City-St-Zip: CLEARWATER, FL 33756

Title: DP

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES M. CARR DVT 04/30/2012