2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 07, 2009
Secretary of State

DOCUMENT# P06000046060

Entity Name: ROYAL PALM INSURANCE COMPANY

Current Principal Place of Business:

7201 NW 11TH PLACE
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

7201 NW 11TH PLACE
GAINESVILLE, FL 32605

New Mailing Address:

FEI Number: 02-0772872 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
DIVISION OF LEGAL SERVICES
200 EAST GAINES STREET
TALLAHASSEE, FL 32314 US

Name and Address of New Registered Agent:

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: CHIEF FINANCIAL OFFICER

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KOMLOFSKE, GERRY
Address: 7201 NW 11TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: TD ( ) Delete
Name: MOSS, THOMAS
Address: 7201 NW 11TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: SD ( ) Delete
Name: KERMATH, JOHN
Address: 801 WARRENVILLE ROAD
City-St-Zip: LISLE, IL 60532

Title: D ( ) Delete
Name: CHARLES, STEPHEN
Address: 801 WARRENVILLE ROAD
City-St-Zip: LISLE, IL 60532

Title: D ( ) Delete
Name: THAMASSON, PHIL
Address: 7201 NW 11TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: GURSAHANEY, KUMAR
Address: 7201 NW 11TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GERRY KOMLOFSKE P 10/07/2009

Electronic Signature of Signing Officer or Director — Date