2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# P96000057299

Entity Name: PROGRAM INSURANCE MANAGEMENT OF SARASOTA, INC.

Current Principal Place of Business:

2201 CANTU CT
STE 102
SARASOTA, FL 34232 US

New Principal Place of Business:

Current Mailing Address:

2201 CANTU CT
STE 102
SARASOTA, FL 34232 US

New Mailing Address:

FEI Number: 65-0681319 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ABEL BAND ATTORNEYS
240 SOUTH PINEAPPLE AVE
SARASOTA, FL 34230 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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete
Name: HAHN, ALEXANDER D CEO
Address: 7272 DONALD ROSSRD WEST
City-St-Zip: SARASOTA, FL

Title: P ( ) Delete
Name: KERR, CHRISTOPHER B PRESIDE
Address: 22245 PANTHER LOOP
City-St-Zip: BRADENTON, FL 34202

Title: VP ( ) Delete
Name: HAGAN, DANIEL J VP
Address: 8309 EAGLE LAKE DR
City-St-Zip: SARASOTA, FL 34241

Title: SEC ( ) Delete
Name: KERR, DINA M SECRATA
Address: 22245 PANTHER LOOP
City-St-Zip: BRADENTON, FL 34202

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:

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: DINA M KERR SEC 02/23/2009

Electronic Signature of Signing Officer or Director — Date