

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000021135

FILED
Apr 22, 2009
Secretary of State

Entity Name: UNITED PROPERTY & CASUALTY INSURANCE COMPANY

Current Principal Place of Business:

700 CENTRAL AVE
STE 302
SAINT PETERSBURG, FL 33701

New Principal Place of Business:

360 CENTRAL AVE
STE 900
SAINT PETERSBURG, FL 33701

Current Mailing Address:

700 CENTRAL AVE
STE 302
SAINT PETERSBURG, FL 33701

New Mailing Address:

360 CENTRAL AVE
STE 900
SAINT PETERSBURG, FL 33701

FEI Number: 59-3560143 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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: D () Delete
Name: DELACEY, PAT
Address: 400 BLACKSTONE AVE
City-St-Zip: LA GRANGE, IL 60525

Title: D () Delete
Name: HOOD, BILL
Address: 2999 PALM HAROR BLVD STE A
City-St-Zip: PALM HARBOR, FL 34683

Title: D () Delete
Name: WHITTEMORE, KENT
Address: 1 BEACH DR SE STE 205
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: D () Delete
Name: DAVIS, KERN
Address: 6319 BAHAMA SHORES DR S
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: D () Delete
Name: BERSET, MARK
Address: 1 BEACH DR SE STE 230
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: DC () Delete
Name: BRANCH, GREG
Address: 335 NE WATULA AVE
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: CRONIN, DONALD
Address: 360 CENTRAL AVENUE, STE 900
City-St-Zip: ST PETERSBURG, FL 33701

Title: SCUO (X) Change () Addition
Name: RUSSELL, MELVIN
Address: 360 CENTRAL AVENUE, STE 900
City-St-Zip: ST PETERSBURG, FL 33701

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

Title: D (X) Change () Addition
Name: POITEVINT, ALEC
Address: 1100 DOTHAN RD
City-St-Zip: BAINBRIDGE, GA 39817

Title: D (X) Change () Addition
Name: PRATT, GORDON
Address: FOUR FOREST PARK, 2ND FLOOR
City-St-Zip: FARMINGTON, CT 06032

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: DONALD CRONIN

PCEO

04/22/2009

Electronic Signature of Signing Officer or Director

_____ Date