

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000963

FILED  
Mar 08, 2005  
Secretary of State

**Entity Name:** FIRST INDEMNITY INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

2202 NW SHORE BLVD STE 200  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

339 NORTHERN AVENUE  
BOSTON, MA 02210

**New Mailing Address:**

41 WEST STREET  
5TH FLOOR  
BOSTON, MA 02111

**FEI Number:** 04-3480902

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIEHL, TIMOTHY G  
604 S MELVILLE AVE #3  
TAMPA, FL 33606 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: PTD ( ) Delete  
Name: BIGGIO, JOHN M  
Address: 126 MAIN STREET  
City-St-Zip: WINTHROP, MA 02152

Title: TD ( ) Delete  
Name: BIGGIO-RANDOLPH, MARIE A  
Address: 21 HOLLAND ROAD  
City-St-Zip: MELROSE, MA 02176

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 for the exemption stated in Section 119.07(3)(i), 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:** JOHN M. BIGGIO

PTD

03/08/2005

Electronic Signature of Signing Officer or Director

Date