

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000041101

FILED  
Apr 01, 2010  
Secretary of State

**Entity Name:** AMERICAN COLONIAL INSURANCE COMPANY, INC.

**Current Principal Place of Business:**

5251 HAMPSTEAD HIGH ST, UNIT 203  
MOTGOMERY, AL 36116

**New Principal Place of Business:**

260 WEKIVA SPINGS ROAD  
SUITE 2060  
LONGWOOD, FL 32779

**Current Mailing Address:**

5251 HAMPSTEAD HIGH STREET  
UNIT 203  
MOTGOMERY, AL 36116

**New Mailing Address:**

260 WEKIVA SPINGS ROAD  
SUITE 2060  
LONGWOOD, FL 32779

**FEI Number:** 23-7170191

**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 32399 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: PCED  
Name: CIZEK, JAMES H  
Address: 7515 COLONY DRIVE  
City-St-Zip: CUMMING, GA 30041

Title: VSD  
Name: DRUHOT, TROY DAVID  
Address: 1918 ENCHANTED WOODS TRAIL  
City-St-Zip: MARIETTA, GA 30062

Title: TD  
Name: SINGH, HEMRAJ (NMI)  
Address: 81 HULLRICK DRIVE  
City-St-Zip: ETOBICOKE, ONTARIO, CANADA, M9A 4E3 CA

Title: D  
Name: MCINTYRE, DOUGLAS EDGAR  
Address: #803-9 BURNHAMTHORPE  
City-St-Zip: ETOBICOKE, ONTARIO, CANADA, M9A 4E3 CA

Title: D  
Name: LONG, CLAY C  
Address: 997 NAWENCH DRIVE  
City-St-Zip: ATLANTA, GA 30327

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 H. CIZEK

PRES

04/01/2010

Electronic Signature of Signing Officer or Director

Date