2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 858338

Entity Name: AMERICAN SECURITY INSURANCE COMPANY

FILED Feb 27, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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260 INTERSTATE NORTH CIR., SE ATLANTA, GA 303392210 US

Current Mailing Address: New Mailing Address:

11222 QUAIL ROOST DRIVE 2ND FLOOR, D7 MIAMI, FL 33157 US

FEI Number: 58-1529575 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 323990000 US

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.

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SIGNATURE:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: FROBOSE, JOHN

Address: 260 INTERSTATE NORTH CIRCLE, SE

City-St-Zip: ATLANTA, GA 30339

Title: S

Name: ARAGON-CRUZ, JEANNIE Address: 11222 QUAIL ROOST DRIVE

City-St-Zip: MIAMI, FL 33157

Title: VP

Name: GILL, GAJINDERPAL P

Address: 260 INTERSTATE NORTH CIRCLE, SE

City-St-Zip: ATLANTA, GA 30339

Title: 7

Name: TURNER, BEECH

Address: 260 INTERSTATE NORTH CIRCLE, SE

City-St-Zip: ALTANTA, GA 30339

Title: SVPD

Name: LEMASTERS, S. CRAIG

Address: 260 INTERSTATE NORTH CIRCLE, NW

City-St-Zip: ALTANTA, GA 30339

Title: GCAS

Name: DECHURCH, GREGORY
Address: 11222 QUAIL ROOST DRIVE

City-St-Zip: MIAMI, FL 33157

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: JEANNIE ARAGON-CRUZ SECR 02/27/2012