2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2013
Secretary of State
CC7798634294

DOCUMENT# 703321

Entity Name: PINELLAS ASSOCIATION OF INSURANCE AGENTS, INC.

Current Principal Place of Business:

4790 1ST ST N
ST PETERSBURG, FL 33703

Current Mailing Address:

4790 1ST ST N
ST PETERSBURG, FL 33703

FEI Number: 59-1966136

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YOUNG, TROY
4790 1ST ST N
ST PETERSBURG, FL 33703 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.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR
Name	PROBST, MICHAEL
Address	12080 S BELCHER RD
City-State-Zip:	LARGO FL 33777

Title	PRESIDENT
Name	COSPER, DAVID
Address	3939 TAMPA RD
City-State-Zip:	OLDSMAR FL 34677

Title	S
Name	YOUNG, TROY
Address	4790 1ST ST N
City-State-Zip:	ST PETERSBURG FL 33703

Title	D
Name	DROSS, MATTHEW
Address	800 CARILLON PARKWAY, SUITE 150
City-State-Zip:	ST PETERSBURG FL 33716

Title	VP
Name	LUDWIG, MICHAEL
Address	2727 ULMERTON RD, SUITE 300
City-State-Zip:	CLEARWATER FL 33762

Title	DIRECTOR
Name	BOUCHARD, JOSH
Address	101 NORTH STARCREST DR
City-State-Zip:	CLEARWATER FL 33765

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TROY YOUNG SECRETARY 01/15/2013

Electronic Signature of Signing Officer/Director Detail — Date