2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2013
Secretary of State
CC7090685130

DOCUMENT# 450487

Entity Name: FLORIDA FARM BUREAU CASUALTY INSURANCE COMPANY

Current Principal Place of Business:

5700 SW 34TH STREET
GAINESVILLE, FL 32608

Current Mailing Address:

5700 SW 34TH STREET
GAINESVILLE, FL 32608

FEI Number: 59-1518356

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000 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	PRES
Name	COURTNEY, BILL L
Address	5700 SW 34TH STREET
City-State-Zip:	GAINESVILLE FL 32608

Title	VP
Name	GINDY, BERT
Address	5700 SW 34TH STREET
City-State-Zip:	GAINESVILLE FL 32608

Title	VPD
Name	SCHIRARD, BRANT
Address	1860 PULITZER ROAD
City-State-Zip:	FORT PIERCE FL 34945

Title	SD
Name	BYRD, MARK A
Address	8286 STONE RD.
City-State-Zip:	APOPKA FL 32703

Title	VP
Name	HILL, MIKE
Address	P.O. BOX 147030
City-State-Zip:	GAINESVILLE FL 32614

Title	D
Name	ANDERSON, RONALD
Address	9516 AIRLINE HIGHWAY
City-State-Zip:	BATON ROUGE LA

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: BILL COURTNEY CEO 02/18/2013

Electronic Signature of Signing Officer/Director Detail — Date