

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 583494

**Entity Name:** INFINITY INSURANCE COMPANY**Current Principal Place of Business:**3700 COLONNADE PARKWAY  
SUITE 600  
BIRMINGHAM, AL 35243**Current Mailing Address:**3700 COLONNADE PARKWAY  
SUITE 600  
BIRMINGHAM, AL 35243 US**FEI Number:** 31-0943862**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 S PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** NONE

04/12/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	D
Name	GOBER, JAMES R
Address	3700 COLONNADE PARKWAY
City-State-Zip:	BIRMINGHAM AL 35243

Title	P
Name	GODWIN, GLEN N
Address	3700 COLONNADE PARKWAY
City-State-Zip:	BIRMINGHAM AL 35243

Title	AT
Name	CLARK, MARYLINN
Address	3700 COLONNADE PARKWAY
City-State-Zip:	BIRMINGHAM AL 35243

Title	SD
Name	SIMON, SAMUEL J
Address	3700 COLONNADE PARKWAY
City-State-Zip:	BIRMINGHAM AL 35243

Title	D
Name	PITRONE, SCOTT C
Address	3700 COLONNADE PARKWAY
City-State-Zip:	BIRMINGHAM AL 35243

Title	CFOD
Name	SMITH, ROGER
Address	3700 COLONNADE PARKWAY
City-State-Zip:	BIRMINGHAM AL 35243

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:** MARYLINN CLARK**ASSISTANT TREASURER** 04/12/2013

Electronic Signature of Signing Officer/Director Detail

Date