

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H20522

**Entity Name:** PROFESSIONAL CASUALTY CORP.

**Current Principal Place of Business:**

1200 S. PINE ISLAND ROAD SUITE 400  
PLANTATION, FL 33324

**Current Mailing Address:**

1200 S. PINE ISLAND ROAD SUITE 400  
PLANTATION, FL 33324

**FEI Number:** 59-2448515

**Certificate of Status Desired:** No

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

SHARE, LAWRENCE D  
1200 SOUTH PINE ISLAND ROAD  
SUITE 400  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title PSD  
Name BRENNAN, AMY SHARE  
Address 1200 S. PINE ISLAND ROAD SUITE 400  
City-State-Zip: PLANTATION FL 33324

*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:** AMY SHARE BRENNAN

**PRESIDENT**

**01/25/2016**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date