

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000064832

**Entity Name:** AMERICAN COASTAL INSURANCE COMPANY

**Current Principal Place of Business:**

351 SW 136 AVENUE, SUITE 201  
DAVIE, FL 33325

**Current Mailing Address:**

C/O KATRINA D. RAMEY  
200 WEST SECOND STREET, 3RD FLOOR  
WINSTON-SALEM, NC 27101 US

**FEI Number:** 26-0280383

**Certificate of Status Desired:** No

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

CHIEF FINANCIAL OFFICER  
STATE OF FLORIDA  
THE CAPITOL  
TALLAHASSEE, FL 32399 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            PRESIDENT, DIRECTOR  
Name            SINGLETARY, TIMOTHY  
Address        351 SW 136 AVENUE, SUITE 201  
City-State-Zip: DAVIE FL 33325

Title            SECRETARY, DIRECTOR  
Name            PRUETT, DAVID M.  
Address        351 SW 136 AVENUE, SUITE 201  
City-State-Zip: DAVIE FL 33325

Title            DIRECTOR  
Name            HOLDER, ANDREA LYNN  
Address        351 SW 136 AVENUE, SUITE 201  
City-State-Zip: DAVIE FL 33325

Title            DIRECTOR  
Name            HOWARD, JOHN  
Address        351 SW 136 AVENUE, SUITE 201  
City-State-Zip: DAVIE FL 33325

Title            DIRECTOR  
Name            PEED, R. DANIEL  
Address        351 SW 136 AVENUE, SUITE 201  
City-State-Zip: DAVIE FL 33325

Title            DIRECTOR  
Name            REECE, H. WADE  
Address        351 SW 136 AVENUE, SUITE 201  
City-State-Zip: DAVIE FL 33325

*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:** DAVID M. PRUETT

**SECRETARY**

**04/11/2015**

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

\_\_\_\_\_  
Date