

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000029873

Entity Name: WESTON INSURANCE HOLDINGS CORPORATION

Current Principal Place of Business:

2525 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134

Current Mailing Address:

P.O. BOX 33-1322
MIAMI, FL 33233 US

FEI Number: 45-1151889

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title	DP	Title	D
Name	LYONS, MICHAEL C	Name	MCCULLY, BRYAN T
Address	P.O. BOX 33-1322	Address	P.O. BOX 33-1322
City-State-Zip:	MIAMI FL 33233	City-State-Zip:	MIAMI FL 33233

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: BRYAN MCCULLY

D

04/23/2013

Electronic Signature of Signing Officer/Director Detail

Date