

**2014 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P97000071536

**FILED**  
**Sep 30, 2014**  
**Secretary of State**  
**CC8016526544**

**Entity Name:** AMERICAN STRATEGIC INSURANCE CORP.

**Current Principal Place of Business:**

1 ASI WAY  
ST PETERSBURG, FL 33702

**Current Mailing Address:**

1 ASI WAY  
ST PETERSBURG, FL 33702 US

**FEI Number:** 59-3459912

**Certificate of Status Desired:** No

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

CHIEF FINANCIAL OFFICER  
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 CS  
Name FASTEAU, MARC CS  
Address 1 ASI WAY  
City-State-Zip: ST PETERSBURG FL 33702

Title PDT  
Name AUER, JOHN FPDT  
Address 1 ASI WAY  
City-State-Zip: ST PETERSBURG FL 33702

Title EVP  
Name MILKEY, KEVIN REVP  
Address 1 ASI WAY  
City-State-Zip: ST PETERSBURG FL 33702

Title D  
Name COOPER, CHARLES  
Address 1 ASI WAY  
City-State-Zip: ST PETERSBURG FL 33702

Title D  
Name HENDRICK, GREG D  
Address 1 ASI WAY  
City-State-Zip: ST PETERSBURG FL 33702

Title VP  
Name BOSTICK, ANGEL VP  
Address 1 ASI WAY  
City-State-Zip: ST PETERSBURG FL 33702

Title VP  
Name FOURNET, MARY FRANCES  
Address 1 ASI WAY  
City-State-Zip: ST PETERSBURG FL 33702

Title VP  
Name MCCRINK, PATRICK  
Address 1 ASI WAY  
City-State-Zip: ST PETERSBURG FL 33702

**Continues on page 2**

*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:** TREVOR HILLIER

**VICE PRESIDENT**

**09/30/2014**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name BRUBAKER, PHILIP  
Address 1 ASI WAY  
City-State-Zip: ST PETERSBURG FL 33702

Title VP  
Name HILLIER, TREVOR  
Address 1 ASI WAY  
City-State-Zip: ST PETERSBURG FL 33702

Title VP  
Name FJARE, TANYA  
Address 1 ASI WAY  
City-State-Zip: ST PETERSBURG FL 33702

Title VP  
Name HANNON, JEFF  
Address 1 ASI WAY  
City-State-Zip: ST. PETERSBURG FL 33702