## 2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# F06000004848

### Entity Name: BROWN & BROWN PROGRAM INSURANCE SERVICES, INC.

## Current Principal Place of Business:

681 S PARKER STREET SUITE 300 ORANGE, CA 92868

## **Current Mailing Address:**

681 S PARKER STREET SUITE 300 ORANGE, CA 92868 US

## FEI Number: 94-3163572

### Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 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

## Officer/Director Detail :

Officer/Direc			
Title	DIRECTOR	Title	VP
Name	WALKER, CHRIS L.	Name	LANNI, JAMES
Address	701 B STREET, SUITE 2100	Address	220 S. RIDGEWOOD AVENUE
City-State-Zip:	SAN DIEGO CA 92101	City-State-Zip:	DAYTONA BEACH FL 32114
Title	CHAIRMAN OF THE BOARD	Title	VP
Name	WALKER, CHRIS L.	Name	WATTS, ANDY
Address	701 B STREET, SUITE 2100	Address	220 S. RIDGEWOOD AVE.
City-State-Zip:	SAN DIEGO CA 92101	City-State-Zip:	DAYTONA BEACH FL 32114
Title	EXECUTIVE VICE PRESIDENT	Title	EXECUTIVE VICE PRESIDENT
Name	JOHNSON, LYNN	Name	JASINSKI, JOHN P.
Address	681 S. PARKER STREET SUITE 200	Address	681 S. PARKER STREET SUITE 300
City-State-Zip:	ORANGE CA 92868	City-State-Zip:	ORANGE CA 92868
Title	TREASURER	Title	PRESIDENT
Name	GORLICK, STEVEN	Name	WITTWER, ANTHONY L.
Address	701B STREET	Address	142 NORTH MAIN STREET P.O. BOX 309
City-State-Zip:	SAN DIEGO CA 92101	City-State-Zip:	ROANOKE IN 46783

## 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: ANTHONY ROBINSON

# VICE PRESIDENT & ASSISTANT SECRETARY

04/14/2017

Date

Electronic Signature of Signing Officer/Director Detail

## FILED Apr 14, 2017 Secretary of State CC4918189260

Certificate of Status Desired: No

#### **Officer/Director Detail Continued :**

Title	VICE PRESIDENT & ASSISTANT SECRETARY	Title	VICE PRESIDENT & SECRETARY
Name	ROBINSON, ANTHONY	Name	LLOYD, ROBERT W.
Address	220 S. RIDGEWOOD AVE.	Address	220 S. RIDGEWOOD AVENUE
City-State-Zip:	DAYTONA BEACH FL 32114	City-State-Zip:	DAYTONA BEACH FL 32114