

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000000948

**Entity Name:** ASSUREDPARTNERS, INC.**Current Principal Place of Business:**200 COLONIAL CENTER PKWY  
SUITE 150  
LAKE MARY, FL 32746**Current Mailing Address:**200 COLONIAL CENTER PKWY  
SUITE 150  
LAKE MARY, FL 32746**FEI Number:** 27-5176829**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 DIRECTOR, CHAIRMAN, CEO  
Name HENDERSON, JIM W  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR, SR. VP, ASST.  
SECRETARY  
Name VREDENBURG, PAUL  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR  
Name KARANDIKAR, ASHISH  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR  
Name VYAS, VIVEK  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR, PRESIDENT, COO,  
SECRETARY  
Name RILEY, THOMAS E  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR  
Name TRUWIT, MITCH  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746

Title CFO, EXEC. VP  
Name CURTIS, DEAN J  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR  
Name YARBROUGH, STUART  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746

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*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:** THOMAS E RILEY**SECRETARY****04/19/2017**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title CHIEF CORPORATE COUNSEL  
Name KINNETT, STANLEY K II  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR  
Name JOLLER, JENS  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR  
Name CASEY, DENNIS  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746

Title EXEC. VP  
Name DEAL, STEVEN C  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746

Title CHIEF COUNSEL, EXEC. VP  
Name SMITH, WALTER L  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR  
Name WILSON, GEORGE LARRY  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746

Title REGIONAL EXEC. VP  
Name ANDERSON, ERIC  
Address 200 COLONIAL CENTER PKWY  
SUITE 150  
City-State-Zip: LAKE MARY FL 32746