2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000003836

Entity Name: UNITED INSURANCE HOLDINGS CORP.

Current Principal Place of Business:

800 2ND AVENUE SOUTH ST. PETERSBURG. FL 33701

Current Mailing Address:

800 2ND AVENUE SOUTH ST. PETERSBURG. FL 33701 US

FEI Number: 75-3241967 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SALMON, KIMBERLY A 800 2ND AVENUE SOUTH ST. PETERSBURG, FL 33701 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: KIMBERLY A SALMON 03/29/2016

Electronic Signature of Registered Agent

Date

FILED Mar 29, 2016

Secretary of State

CC6963511247

Officer/Director Detail:

Title CEO, PRESIDENT, DIRECTOR Title CFO, TREASURER FORNEY, JOHN L MARTZ, BENNETT B Name Name 800 2ND AVENUE SOUTH 800 2ND AVENUE SOUTH Address Address City-State-Zip: ST. PETERSBURG FL 33701 ST. PETERSBURG FL 33701 City-State-Zip:

Title C Title D

Name BRANCH, GREGORY C Name POITEVINT, ALEC L

Address 800 2ND AVENUE SOUTH Address 800 2ND AVENUE SOUTH

City-State-Zip: ST. PETERSBURG FL 33701 City-State-Zip: ST. PETERSBURG FL 33701

Title D Title DIRECTOR

Name WHITTEMORE, KENT G Name HOOD, WILLIAM

Address 800 2ND AVENUE SOUTH Address 800 2ND AVENUE SOUTH

City-State-Zip: ST. PETERSBURG FL 33701 City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR Title DIRECTOR

Name DAVIS, KERN Name HUDSON, SHERRILL

Address 800 2ND AVENUE SOUTH Address 800 2ND AVENUE SOUTH

City-State-Zip: ST. PETERSBURG FL 33701 City-State-Zip: ST. PETERSBURG FL 33701

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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: KIMBERLY A. SALMON SECRETARY 03/29/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title SECRETARY

Name SALMON, KIMBERLY A
Address 800 2ND AVENUE SOUTH
City-State-Zip: ST. PETERSBURG FL 33701