

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 28, 2017
Secretary of State
CC9773708745

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

04/28/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

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

Title C
Name BRANCH, GREGORY C
Address 800 2ND AVENUE SOUTH
City-State-Zip: ST. PETERSBURG FL 33701

Title D
Name POITEVINT, ALEC L
Address 800 2ND AVENUE SOUTH
City-State-Zip: ST. PETERSBURG FL 33701

Title D
Name WHITTEMORE, KENT G
Address 800 2ND AVENUE SOUTH
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR
Name HOOD, WILLIAM
Address 800 2ND AVENUE SOUTH
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR
Name DAVIS, KERN
Address 800 2ND AVENUE SOUTH
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR
Name HUDSON, SHERRILL
Address 800 2ND AVENUE SOUTH
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

04/28/2017

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