

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743976

FILED
Feb 10, 2011
Secretary of State

Entity Name: FLORIDA LAWYERS' LEGAL INSURANCE CORPORATION

Current Principal Place of Business:

651 EAST JEFFERSON STREET
TALLAHASSEE, FL 323992300

New Principal Place of Business:

Current Mailing Address:

651 EAST JEFFERSON STREET
ATTN: G. DAN BENNETT
TALLAHASSEE, FL 32399

New Mailing Address:

FEI Number: 59-1932693 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FERDIE, AINSLEE R
717 PONCE DE LEON
SUITE 215
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VP
Name: ALEXANDER, WILLIAM J
Address: 5235 CONNER DR
City-St-Zip: LAND O LAKES, FL 34639

Title: PD
Name: FERDIE, AINSLEE R
Address: 717 PONCE DE LEON #223
City-St-Zip: CORAL GABLES, FL

Title: TD
Name: BENNETT, G. DAN
Address: 651 EAST JEFFERSON STREET
City-St-Zip: TALLAHASSEE, FL 323992300

Title: D
Name: GARRETT, WILLIAM R
Address: 514 MAGNOLIA AVE
City-St-Zip: PANAMA CITY, FL 32401

Title: D
Name: BYRD, ALAN P
Address: 1031 IVES DAIRY RD
City-St-Zip: MIAMI, FL 33179

Title: D
Name: MURPHY, WILLIAM F III
Address: 152 NE 167TH ST STE 300
City-St-Zip: N MIAMI BEACH, FL 33162

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: G. DAN BENNETT

TD

02/10/2011

Electronic Signature of Signing Officer or Director

Date