

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765018

FILED
Mar 03, 2011
Secretary of State

Entity Name: FLORIDASELF-INSURERS GUAR ANTY ASSOCIATION, INCORPORATED

Current Principal Place of Business:

1427 E. PIEDMONT DRIVE - 2ND FLOOR
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

Current Mailing Address:

1427 E. PIEDMONT DRIVE - 2ND FLOOR
TALLAHASSEE, FL 32308 US

New Mailing Address:

FEI Number: 59-2225004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SORENSEN, JAMES E
2015 DELTA BOULEVARD
TALLAHASSEE, FL 32303 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: C
Name: REVELS, JR, CLAUDE D
Address: 9985 PRITCHARD DR
City-St-Zip: JACKSONVILLE, FL 32219

Title: D
Name: WINTERLING, CHRISTINE
Address: 1 NORTH CLEMANTIS STREET, SUITE 200
City-St-Zip: WEST PALM BEACH, FL 33401

Title: S
Name: GIRIMONT, TRINA M
Address: 1600 S W ARCHER ROAD, #1004
City-St-Zip: GAINESVILLE, FL 32610

Title: T
Name: CALLAHAN, SANDRA W
Address: 702 N FRANKLIN STREET
City-St-Zip: TAMPA, FL 33602

Title: D
Name: BROUSSARD, MICHAEL
Address: 445 W. COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: VC
Name: BOWDEN, CHARLES A
Address: 205 NORTH WEST 2ND STREET
City-St-Zip: MULBERRY, FL 33860

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: CLAUDE D. REVELS, JR.

C

03/03/2011

Electronic Signature of Signing Officer or Director

Date