

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001427

FILED
Apr 13, 2011
Secretary of State

Entity Name: PROFESSIONAL INDEMNITY AGENCY, INC.

Current Principal Place of Business:

37 RADIO CIRCLE DRIVE
MT. KISCO, NY 10549

New Principal Place of Business:

Current Mailing Address:

13403 NORTHWEST FREEWAY
ATTN: LEGAL DEPT.
HOUSTON, TX 77040

New Mailing Address:

FEI Number: 13-2918810 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: PCEO
Name: HUBBARD, WILLIAM F
Address: 401 EDGEWATER PLACE
City-St-Zip: WAKEFIELD, MA 01880 US

Title: VD
Name: WHAMOND, W. TOBIN
Address: 13403 NORTHWEST FREEWAY
City-St-Zip: HOUSTON, TX 77040 US

Title: VS
Name: RINICELLA, RANDY D
Address: 13403 NORTHWEST FREEWAY
City-St-Zip: HOUSTON, TX 77040 US

Title: VT
Name: LEE, JONATHAN
Address: 13403 NORTHWEST FREEWAY
City-St-Zip: HOUSTON, TX 77040 US

Title: VD
Name: MOLBECK, JOHN N JR.
Address: 13403 NORTHWEST FREEWAY
City-St-Zip: HOUSTON, TX 77040 US

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: RANDY D. RINICELLA

VS

04/13/2011

Electronic Signature of Signing Officer or Director

Date