2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2012
Secretary of State

DOCUMENT# F05000007468

Entity Name: BUILDERS INSURANCE GROUP, INC.

Current Principal Place of Business:

2410 PACES FERRY ROAD, SUITE 300
ATLANTA, GA 30339

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 723099
ATLANTA, GA 31139

New Mailing Address:

FEI Number: 58-2453325 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLORIDA INSURANCE COMMISSIONER
FLORIDA DOI
200 E. GAINES STREET
TALLAHASSEE, FL 32399 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: VD
Name: MCMURRAY, LINDA R
Address: 2410 PACES FERRY RD, SUITE 300
City-St-Zip: ATLANTA, GA 30339

Title: PD
Name: MITCHELL, PATRICK J
Address: 2410 PACES FERRY RD, SUITE 300
City-St-Zip: ATLANTA, GA 30339

Title: VD
Name: MAUPIN, THOMAS S
Address: 2410 PACES FERRY ROAD, SUITE 300
City-St-Zip: ATLANTA, GA 30339

Title: VT
Name: DWOSKIN, OWEN A
Address: 2410 PACES FERRY ROAD, SUITE 300
City-St-Zip: ATLANTA, GA 30339

Title: VS
Name: EDWARDS, CRAIG R
Address: 2410 PACES FERRY ROAD, SUITE 300
City-St-Zip: ATLANTA, GA 30339

Title: V
Name: KORSAN, ROBERT J
Address: 2410 PACES FERRY ROAD, SUITE 300
City-St-Zip: ATLANTA, GA 30339

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: CRAIG R. EDWARDS VS 04/24/2012

Electronic Signature of Signing Officer or Director — Date