

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F06000003417

**FILED**  
**Sep 26, 2012**  
**Secretary of State**

**Entity Name:** SPECIAL MARKETS INSURANCE CONSULTANTS, INC.

**Current Principal Place of Business:**

2615 POST ROAD  
STEVENS POINT, WI 54481

**New Principal Place of Business:**

4725 PIEDMONT ROW DRIVE  
SUITE 600  
CHARLOTTE, NC 28210

**Current Mailing Address:**

2615 POST ROAD  
STEVENS POINT, WI 54481

**New Mailing Address:**

4725 PIEDMONT ROW DRIVE  
SUITE 600  
CHARLOTTE, NC 28210

**FEI Number:** 39-1529714

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RAECKERS, GARY  
10117 WOODSONG WAY  
TAMPA, FL 33618 US

**Name and Address of New Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MARIE EDWARDS

09/26/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: STRANSKY, NORA K  
Address: 2615 POST ROAD  
City-St-Zip: STEVENS POINT, WI 54481

Title: CEO  
Name: WALKER, JOHN K  
Address: 125 S WACKER DRIVE, SUITE 1350  
City-St-Zip: CHICAGO, IL 60606

Title: VP  
Name: PURVIANCE, SCOTT M  
Address: 4725 PIEDMONT ROW DR. SUITE 600  
City-St-Zip: CHARLOTTE, NC 28210

Title: ASEC  
Name: HIGBEA, ANGELA  
Address: 4725 PIEDMONT ROW DRIVE SUITE 600  
City-St-Zip: CHARLOTTE, NC 28210

Title: DIR  
Name: DECARLO, MICHAEL S  
Address: 4725 PIEDMONT ROW DRIVE SUITE 600  
City-St-Zip: CHARLOTTE, NC 28210

Title: DIR  
Name: PURVIANCE, SCOTT M  
Address: 4725 PIEDMONT ROW DR. SUITE 600  
City-St-Zip: CHARLOTTE, NC 28210

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: SCOTT M. PURVIANCE

VP

09/26/2012

Electronic Signature of Signing Officer or Director

Date