

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001005

FILED
Jan 23, 2012
Secretary of State

Entity Name: ENVISION INSURANCE COMPANY

Current Principal Place of Business:

2181 E AURORA ROAD
TWINSBURG, OH 44087

New Principal Place of Business:

Current Mailing Address:

2181 E AURORA ROAD
TWINSBURG, OH 44087

New Mailing Address:

FEI Number: 20-4308924

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: PD
Name: NAGLE, KEVIN M
Address: 1100 INVESTMENT BLVD.
City-St-Zip: EL DORADO HILLS, CA 95762

Title: EVPD
Name: KATZ, BARRY I
Address: 1301 E. BROWARD BLVD., SUITE 300
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: SD
Name: SAMUELS, EUGENE P
Address: 1100 INVESTMENT BLVD.
City-St-Zip: EL DORADO HILLS, CA 95762

Title: VPD
Name: STRAUTMAN, CATHERINE
Address: 1301 E. BROWARD BLVD., SUITE 300
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: TD
Name: KIRKBRIDE, KIMBERLY
Address: 2181 E AURORA ROAD
City-St-Zip: TWINSBURG, OH 44087

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: EUGENE P SAMUELS

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01/23/2012

Electronic Signature of Signing Officer or Director

_____ Date