

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000004295

FILED
Jan 05, 2011
Secretary of State

Entity Name: INSTITUTIONAL INSURANCE MANAGERS OF AMERICA, INC.

Current Principal Place of Business:

110 HAMMOND DR.
SANDY SPRINGS, GA 30328

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 720475
SANDY SPRINGS, GA 30358

New Mailing Address:

FEI Number: 58-1709848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLS, GREGORY T
2692 AIA SOUTH, SUITE 107
ST. AUGUSTINE, FL 320844909 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: PRES
Name: MILLS JR, WILLIAM D
Address: 1356 MICHAEL WAY
City-St-Zip: MARIETTA, GA 30062

Title: EX-V
Name: MILLS, GREGORY T
Address: 157 KINGS QUARRY LANE
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: S
Name: MILLS, PATRICIA A
Address: 1356 MICHAEL WAY
City-St-Zip: MARIETTA, GA 30062

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: WILLIAM D MILLS JR

PRES

01/05/2011

Electronic Signature of Signing Officer or Director

Date