2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2011
Secretary of State

DOCUMENT# F09000004637

Entity Name: NFP PROPERTY & CASUALTY SERVICES, INC.

Current Principal Place of Business:

707 WESTCHESTER AVE
WHITE PLAINS, NY 10604

New Principal Place of Business:

Current Mailing Address:

C/O NFP, 500 W. MADISON STREET
SUITE 2400
CHICAGO, IL 60661

New Mailing Address:

FEI Number: 13-3616686 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: D
Name: SCHNEIDER, BRETT
Address: 304 MADISON AVE 20TH FLOOR
City-St-Zip: NEW YORK, NY 10173

Title: P
Name: BIANCARDI, GEORGE
Address: 707 WESTCHESTER STREET, SUITE 201
City-St-Zip: WHITE PLAINS, NY 10604

Title: ST
Name: MAXHAM, DAVID
Address: 707 WESTCHESTER STREET, SUITE 201
City-St-Zip: WHITE PLAINS, NY 10604

Title: D
Name: GOLDMAN, MICHAEL N
Address: 340 MADISON AVENUE, 20TH FLOOR
City-St-Zip: NEW YORK, NY 10173

Title: D
Name: HINKSON, MALIKA S
Address: 340 MADISON AVE 20TH FLOOR
City-St-Zip: NEW YORK, NY 10173

Title: V
Name: LIESER, LORI M
Address: 500 W. MADISON STREET, SUITE 2400
City-St-Zip: CHICAGO, IL 60661

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: LORI M. LIESER V 04/28/2011

Electronic Signature of Signing Officer or Director Date