2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2011
Secretary of State

DOCUMENT# F10000004044

Entity Name: PROGRESSIVE BAYSIDE INSURANCE COMPANY

Current Principal Place of Business:

6300 WILSON MILLS RD
MAYFIELD VILLAGE, OH 44143

New Principal Place of Business:

4030 CRESCENT PARK DRIVE
BUILDING B
RIVERVIEW, FL 33569

Current Mailing Address:

6300 WILSON MILLS RD
MAYFIELD VILLAGE, OH 44143

New Mailing Address:

4030 CRESCENT PARK DRIVE
BUILDING B
RIVERVIEW, FL 33569

FEI Number: 31-1193845 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E GAINES ST
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: PD
Name: BARONE, KAREN A
Address: 4030 CRESCENT PARK DRIVE, BUILDING B
City-St-Zip: RIVERVIEW, FL 33569

Title: DIR
Name: LEMIEUX, KATHI
Address: 4030 CRESCENT PARK DRIVE, BUILDING B
City-St-Zip: RIVERVIEW, FL 33569

Title: TREA
Name: KING, THOMAS A
Address: 4030 CRESCENT PARK DRIVE, BUILDING B
City-St-Zip: RIVERVIEW, FL 33569

Title: DIR
Name: PRATT, DAVID L
Address: 4030 CRESCENT PARK DRIVE, BUILDING B
City-St-Zip: RIVERVIEW, FL 33569

Title: VP
Name: ANDREANO, MARY B
Address: 4030 CRESCENT PARK DRIVE, BUILDING B
City-St-Zip: RIVERVIEW, FL 33569

Title: SEC
Name: SHRALLOW, DANE A
Address: 4030 CRESCENT PARK DRIVE, BUILDING B
City-St-Zip: RIVERVIEW, FL 33569

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: ANNE MEYER POA 03/21/2011

Electronic Signature of Signing Officer or Director — Date