

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000005045

FILED
Apr 23, 2012
Secretary of State

Entity Name: PROASSURANCE GROUP SERVICES CORPORATION

Current Principal Place of Business:

100 BROOKWOOD PL
BIRMINGHAM, AL 35209

New Principal Place of Business:

Current Mailing Address:

100 BROOKWOOD PL
BIRMINGHAM, AL 35209

New Mailing Address:

FEI Number: 63-1285505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CD
Name: STARNES, W. STANCIL
Address: 100 BROOKWOOD PL
City-St-Zip: BIRMINGHAM, AL 35209

Title: DP
Name: ADAMO, VICTOR T
Address: 100 BROOKWOOD PL
City-St-Zip: BIRMINGHAM, AL 35209

Title: TD
Name: RAND, EDWARD L JR
Address: 100 BROOKWOOD PL
City-St-Zip: BIRMINGHAM, AL 35209

Title: VPS
Name: NEVILLE, KATHRYN A
Address: 100 BROOKWOOD PL
City-St-Zip: BIRMINGHAM, AL 35209

Title: VPAT
Name: BREWER, KELLY B
Address: 100 BROOKWOOD PL
City-St-Zip: BIRMINGHAM, AL 35209

Title: VPD
Name: FRIEDMAN, HOWARD H
Address: 100 BROOKWOOD PL
City-St-Zip: BIRMINGHAM, AL 35209

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: KATHRYN A. NEVILLE

SECR

04/23/2012

Electronic Signature of Signing Officer or Director

Date