2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2012
Secretary of State

DOCUMENT# F99000005778

Entity Name: PODIATRY INSURANCE COMPANY OF AMERICA

Current Principal Place of Business:

3000 MERIDIAN BOULEVARD
SUITE 400
FRANKLIN, TN 37067

New Principal Place of Business:

Current Mailing Address:

3000 MERIDIAN BOULEVARD
SUITE 400
FRANKLIN, TN 37067

New Mailing Address:

FEI Number: 58-1403235 **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 323990000 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: PCEO
Name: BRANT, JERRY D DPM
Address: 3000 MERIDIAN BOULEVARD, SUITE 400
City-St-Zip: FRANKLIN, TN 37067

Title: S
Name: NEVILLE, KATHRYN A
Address: 100 BROOKWOOD PLACE, SUITE 300
City-St-Zip: BIRMINGHAM, AL 35209

Title: EVP
Name: TAUBMAN, ROSS E
Address: 3000 MERIDIAN BLVD., SUITE 400
City-St-Zip: FRANKLIN, TN 37067

Title: SRVP
Name: WILCZEK, ADAM P
Address: 3000 MERIDIAN BLVD., SUITE 400
City-St-Zip: FRANKLIN, TN 37067

Title: AS
Name: FOX, JANET C
Address: 3000 MERIDIAN BOULEVARD, SUITE 400
City-St-Zip: FRANKLIN, TN 37067

Title: T
Name: HENDRICKS, DANA S
Address: 3000 MERIDIAN BOULEVARD, SUITE 400
City-St-Zip: FRANKLIN, TN 37067

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: JANET C. FOX AS 02/17/2012

Electronic Signature of Signing Officer or Director — Date