

# 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# H85126

Entity Name: AEQUICAP INSURANCE COMPANY

FILED  
Nov 05, 2009  
Secretary of State

## Current Principal Place of Business:

3000 W CYPRESS CREEK RD  
FT. LAUDERDALE, FL 33309

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 9088  
FT. LAUDERDALE, FL 33310

## New Mailing Address:

FEI Number: 59-2599788

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
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: DCEO ( ) Delete  
Name: STEPHENSON, MARK  
Address: 3000 W CYPRESS CREEK RD  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: C ( ) Delete  
Name: MORGAMAN, PHILIP E.  
Address: 3000 W CYPRESS CREEK RD  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D ( ) Delete  
Name: MORGAMAN, JUSTIN  
Address: 3000 W CYPRESS CREEK RD  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D ( ) Delete  
Name: NICHOLS, NEAL  
Address: 3251 WASHINGTON BLVD  
City-St-Zip: ARLINGTON, VA 22201

Title: DSVT ( ) Delete  
Name: GARDNER, DEBORAH S  
Address: 3000 W CYPRESS CREEK RD  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: PCOO ( ) Delete  
Name: ROBERTS, JAMES E  
Address: 3000 W CYPRESS CREEK RD  
City-St-Zip: FORT LAUDERDALE, FL 33309

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: JONES, MATTHEW T  
Address: 3000 W CYPRESS CREEK RD  
City-St-Zip: FORT LAUDERDALE, FL 33309

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MATTHEW T JONES

P

11/05/2009

Electronic Signature of Signing Officer or Director

Date

11/05/2009 2:01 FAX 998

TAXI:

Attachment to Amended  
A/R

002/008

H85126

11/5/09

AEQUICAP INSURANCE COMPANY  
ADDITIONAL DIRECTORS AND OFFICERS:  
Document number: H85126

Title:	D
Name:	Charlie King
Street Address:	3251 Washington Blvd.
City-St-Zip:	Arlington, VA 22201
Title:	V
Name:	Marilyn Peterson
Street Address:	3000 W. Cypress Creek Rd.
City-St-Zip:	Ft. Lauderdale, Florida 33309
Title:	V
Name:	Norm Baker
Street Address:	3000 W. Cypress Creek Rd.
City-St-Zip:	Ft. Lauderdale, Florida 33309
Title:	V
Name:	Brittany Rodgers
Street Address:	3000 W. Cypress Creek Rd.
City-St-Zip:	Ft. Lauderdale, Florida 33309
Title:	S,VP
Name:	Nicole Boodram
Street Address:	3000 W. Cypress Creek Rd.
City-St-Zip:	Ft. Lauderdale, Florida 33309
Title:	V
Name:	John Pecoraro
Street Address:	3000 W. Cypress Creek Rd.
City-St-Zip:	Ft. Lauderdale, Florida 33309
	Document number: H85126
Title:	V
Name:	Susan M. Plochoki
Street Address:	3000 W. Cypress Creek Rd.
City-St-Zip:	Ft. Lauderdale, Florida 33309
Title:	V
Name:	Bradford St. Pierre
Street Address:	3000 W. Cypress Creek Rd.
City-St-Zip:	Ft. Lauderdale, Florida 33309