2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L48713

FILED Jan 11, 2010 Secretary of State

Entity Name: PROFESSIONAL INSURANCE SYSTEMS OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

10033 DR MLK ST NO 5700 FIRST AVENUE NORTH ST PETERSBURG, FL 33710 US

ST PETERSBURG, FL 33716 US

Current Mailing Address: New Mailing Address:

10033 DR MLK ST NO 5700 FIRST AVENUE NORTH ST PETERSBURG, FL 33710 US

ST PETERSBURG, FL 33716 US

FEI Number: 59-2989582 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PATTERSON, BARBARA J 10033 DR MLK ST NO 3RD FLOOR

ST PETERSBURG, FL 33716 US

PATTERSON, BARBARA J 5700 FIRST AVENUE NORTH ST PETERSBURG, FL 33710 US

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: 01/11/2010

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD

Name: MEDNICK, HOWARD A PD
Address: 5700 FIRST AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: PRES

Name: MEDNICK, SCOTT E
Address: 5700 FIRST AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: STD

Name: PATTERSON, BARBARA J Address: 5700 FIRST AVENUE NORTH City-St-Zip: SAINT PETERSBURG, FL 33710

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: BARBARA PATTERSON STD 01/11/2010