## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000004511

FILED Jan 28, 2011 Secretary of State

Entity Name: THE NATIONAL SOCIETY OF PROFESSIONAL INSURANCE INVESTIGATORS, INC.

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

320 DUNDAS DR. 12012 SOUTH SHORE BLVD.

SUITE 1 SUITE 200

JACKSONVILLE, FL 32218 US WELLINGTON, FL 33414 US

Current Mailing Address: New Mailing Address:

320 DUNDAS DR. 12012 SOUTH SHORE BLVD.

SUITE 1 SUITE 200

JACKSONVILLE, FL 32218 US WELLINGTON, FL 33414 US

FEI Number: 14-1841663 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:

REYNOLDS, MICHAEL GROELLE, ROBERT

320 DUNDAS DR. 12012 SOUTH SHORE BLVD. SUITE 1 SUITE 200

JACKSONVILLE, FL 32218 US WELLINGTON, FL 33414 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: ROBERT GROELLE 01/28/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

Name: GROELLE, ROBERT

Address: 12012 SOUTH SHORE BLVD. #200 City-St-Zip: WELLINGTON, FL 33414 US

Title: VP1

Name: CLAUSEN, GINA

Address: 12012 SOUTH SHORE BLVD., SUITE 200

City-St-Zip: WELLINGTON, FL 33414 US

Title: VP2

Name: TENZER, BRIAN

Address: 100 NE 3RD AVENUE, SUITE 400 City-St-Zip: FT. LAUDERDALE, FL 33301

Title: SEC

Name: NOCERO, AIMEE M ESQUIRE
Address: 1332 W COLONIAL DR
City-St-Zip: ORLANDO, FL 32804 US

Title:

Name: MCCULLOUGH, MELISSA ESQUIRE Address: 1450 S. WOODLAND BLVD., 4TH FLOOR

City-St-Zip: DELAND, FL 32720 US

Title: TREA

Name: O'DOWD, MICHAEL J Address: 14305 LORD BARCLAY DRIVE City-St-Zip: ORLANDO, FL 32837 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL J. O'DOWD TREA 01/28/2011