2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007
Secretary of State

DOCUMENT# N02000007649

Entity Name: FLORIDA PROPERTY AND CASUALTY ASSOCIATION-CCE, INC.

Current Principal Place of Business:

1224 GREENSWARD DR
TALLAHASSEE, FL 32312

New Principal Place of Business:

6753 THOMASVILLE RD., STE 108-323
TALLAHASSEE, FL 32312

Current Mailing Address:

1224 GREENSWARD DR
TALLAHASSEE, FL 32312

New Mailing Address:

6753 THOMASVILLE RD., STE 108-323
TALLAHASSEE, FL 32312

FEI Number: 32-0036425 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRIMSLEY, CHARLES J
3909 NE 163RD ST
NORTH MIAMI BEACH, FL 33160 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: D/C ( ) Delete
Name: GRIMSLEY, CHARLES J
Address: 3909 NE 163RD ST
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: D/ST ( ) Delete
Name: SCATTURO, JOE
Address: 3909 NE 163RD ST
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: DT ( ) Delete
Name: DOLL, DIANE L
Address: 1224 GREENSWARD DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE L DOLL DT 04/09/2007

Electronic Signature of Signing Officer or Director — Date