2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004888

FILED Feb 24, 2012 Secretary of State

Entity Name: NATIONAL WORKERS' COMPENSATION DEFENSE NETWORK, INC.

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

315 PLANT AVE TAMPA, FL 33606

Current Mailing Address: New Mailing Address:

315 PLANT AVE PO BOX 19207 TAMPA, FL 33606 PALEIGH, NC 27619

FEI Number: 33-1092131 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:

GRACE, ROBERT J 315 PLANT AVE TAMPA, FL 33606 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: STILES, MARY ANN Address: 315 PLANT AVE. City-St-Zip: TAMPA, FL 33606

Title: PD

Name: ROSS, WILLIAM S

Address: 1400 MCDONALD INVEST. CTR 800 SUPERIOR AV

City-St-Zip: CLEVELAND, OH 441142688

Title: VD

Name: TAYLOR, RAYFORD H

Address: SIX CONCOURSE PKWY, SUITE 2200

City-St-Zip: ATLANTA, GA 30328

Title:

Name: WANN, DIANA

Address: 132 E MAIN STREET, SUITE 301 City-St-Zip: CRAWFORDSVILLE, IN 47933

Title: SE

Name: RANDALL, ALBERT B JR.

Address: TWO N. CHARLES STREET, SUITE 600

City-St-Zip: BALTIMORE, MD 21201

Title: TD

Name: CLEARY, MELISSA

Address: 4800 SIX FORKS ROAD, SUITE 300

City-St-Zip: RALEIGH, NC 27609

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: MELISSA R. CLEARY TD 02/24/2012