2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010584

Apr 17, 2007 Secretary of State

Entity Name: BROWN & BROWN DISASTER RELIEF FOUNDATION, INC.

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

3101 W MARTIN LUTHER KING, JR BLVD 3101 W. MLK, JR. BOULEVARD

STE 400 SUITE 400

TAMPA, FL 33607 TAMPA, FL 33607

Current Mailing Address: New Mailing Address:

3101 W. MLK, JR. BOULEVARD 3101 W MARTIN LUTHER KING, JR BLVD

STE 400 SUITE 400

TAMPA, FL 33607 TAMPA, FL 33607

FEI Number: 20-3617312 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:

GRAMMIG, LAUREL L CORPORATION SERVICE COMPANY

3101 W MÁRTIN LUTHER KING, JR BLVD 1201 HAYS STREET TALLAHASSEE, FL 32301 STE 400 US

TAMPA, FL 33607 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: JACQUELINE M. GILES 04/17/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete DONEGAN, THOMAS M JR. DONEGAN, JR., THOMAS M Name: Name:

3101 W MARTIN LUTHER KING JR BLVD - STE400 Address: 3101 W. MLK, JR. BOULEVARD, SUITE 400 Address:

City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33607

Title: () Delete Title: (X) Change () Addition

SIMONS, WILLIAM Name: LANNI, JAMES Name: Address: 3101 W. MLK JR. BLVD., SUITE 400 Address: 3101 W. MLK. JR. BOULEVARD. SUITE 400

City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33607

Title: () Delete Title: () Change (X) Addition SIMONS, WILLIAM N Name: Name:

Address: Address:

3101 W. MLK, JR. BOULEVARD, SUITE 400

City-St-Zip: City-St-Zip: TAMPA, FL 33607

Title: () Delete Title: () Change (X) Addition

Name: Name: SIMONS, WILLIAM N

3101 W. MLK, JR. BOULEVARD, SUITE 400 Address: Address:

City-St-Zip: City-St-Zip: TAMPA, FL 33607

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: JAMES LANNI S,D 04/17/2007