

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000006320

FILED
Jan 11, 2012
Secretary of State

Entity Name: FLORIDA FRATERNAL INSURANCE COUNSELLORS INCORPORATED

Current Principal Place of Business:

29439 CORTEZ BLVD
BROOKSVILLE, FL 34602 US

New Principal Place of Business:

Current Mailing Address:

276 SILAS COURT
SPRING HILL, FL 346099083 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLANTON, MARK
29439 CORTEZ BLVD
BROOKSVILLE, FL 34602 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: PRES
Name: BLANTON, MARK
Address: 29439 CORTEZ BLVD
City-St-Zip: BROOKSVILLE, FL 34602

Title: VP
Name: DIPIANO, JOSEPH J
Address: 276 SILAS COURT
City-St-Zip: SPRING HILL, FL 34609 90

Title: TREA
Name: PREDMORE, LAUREL
Address: 7001 ALBERTA STREET
City-St-Zip: BROOKSVILLE, FL 34604

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: MARK BLANTON

PRES

01/11/2012

Electronic Signature of Signing Officer or Director

Date