

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48823

FILED
Mar 17, 2011
Secretary of State

Entity Name: FLOOD INSURANCE SERVICING COMPANIES ASSOCIATION OF AMERICA, INC.

Current Principal Place of Business:

801 94TH AVE. NORTH
SUITE 200
ST. PETERSBURG, FL 33702 US

New Principal Place of Business:

Current Mailing Address:

801 94TH AVE. NORTH
SUITE 200
ST. PETERSBURG, FL 33702 US

New Mailing Address:

FEI Number: 59-3136263 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

TEMPLETON-JONES, PATRICIA E
801 94TH AVE. N
SUITE 200
ST. PETERSBURG,, FL 33702 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: PD
Name: TEMPLETON-JONES, PATRICIA
Address: 801 94TH AVE. N. SUITE 200
City-St-Zip: ST. PETERSBURG, FL 33702

Title: SD
Name: VILLA, DOLORES
Address: 8655 E VIA DE VENTURA
City-St-Zip: SCOTTSDALE, AZ 85258

Title: TD
Name: MORRISON, CORISE
Address: 9800 FREDERICKSBURG ROAD F-3-W E2
City-St-Zip: SAN ANTONIO, TX 78288

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: PATRICIA TEMPLETON-JONES

PD

03/17/2011

Electronic Signature of Signing Officer or Director

Date