## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N98000005100

04-10-2007 90015 010 \*\*\*150.00

FILED

Apr 10, 2007 8:00 am Secretary of State

FCCI MUTUAL INSURANCE HOLDING COMPANY

Principal Place of Business

6300 UNIVERSITY PARKWAY 6300 UNIVERSITY PARKWAY SARASOTA, FL 34240 SARASOTA, FL 34240 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Ζip Country

Mailing Address

40055491



03272007 Chg-NP CR2E037 (12/06) Applied For 4. FEI Number 65-0866461 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KOVAL, THOMAS A 6300 UNIVERSITY PARKWAY Street Address (P.O. Box Number is Not Acceptable) SARASOTA, FL 34240 Zip Code City 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2007 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition TITLE X Delete TITLE WEBBER, DAVID NAME NAME SEE ATTACHED 6300 UNIVERSITY PARKWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34240 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition STAFFORD, JOHN T NAME MAME STREET ADDRESS 6300 UNIVERSITY PARKWAY STREET ADDRESS SARASOTA, FL 34240 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition JACOBS, G.W. NAME NAME 6300 UNIVERSITY PARKWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34240 CITY-ST-ZIP Change Addition ☐ Delete TITLE BAUMANN, CHARLES NAME NAME STREET ADDRESS 6300 UNIVERSITY PKWY. STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34240 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME CLARKE, TIMOTHY 6300 UNIVERSITY PKWY STREET ADDRESS STREET ADDRESS SARASOTA, FL 34240 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition X Defete TITLE TITLE STOTTLEEMYER, CHARLES NAME NAME STREET ADDRESS 6300 UNIVERSITY PKWY STREET ADDRESS

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SARASOTA, FL 34240

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

800 226-3224 Daytime Phone #

## ATTACHMENT

Director Vice Chairman Chairman Title

Director Director Director Director

Executive Vice President & Secretary Director/Pres/CEO Executive V.P./CFO/Treasurer

Executive V.P./Chief Regional Officer Executive Vice President

Name

**FCCI Mutual Insurance Holding Company** 

Florida 2007 Annual Report FEIN: 65-0866461

Charles Baumann H. Ronald Foxworthy Robert Flanders William Getzen

Marvin Haber Tim Clarke

Craig Johnson Debra Douglas Gordon W. Jacobs

Rupert Willis

John Stafford

Joseph Keene

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Address