2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000059019

Entity Name: F & R INSURANCE GROUP, INC

FORT LAUDERDALE, FL 33301

City-St-Zip:

FILED Apr 21, 2009 Secretary of State

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Current P	rincipal Place	e of Business:	New Principal Place o	New Principal Place of Business:	
9100 S DA MIAMI, FL	NDELAND BLV 33156	D STE 900			
Current M	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
9100 S DA MIAMI, FL	ADELAND BLV 33156	D STE 900			
FEI Number:	: 65-1113248	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
12000 BISONORTH M	HOMAS E ESC CAYNE BLVD IIAMI, FL 3318 Inamed entity of Florida.	#800 11 US	e purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered A	Agent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (FEINBERG, EL 6761 SW 89 T MIAMI, FL 331	ERRACE	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	RUBIN, WILLIA) Delete M D OLAS BLVD. #1250	Title: (Name: Address:	() Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELI M. FEINBERG PART 04/21/2009