2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000018979

Entity Name: FLORIDA BUSINESS INSURANCE, INC.

FILED Jan 05, 2012 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|------------------------------------|
| Current Finicipal Flace of Dusiness. | New Fillicipal Flace of Dusiliess. |

123 NW 13TH STREET SUITE 208 BOCA RATON, FL 33432

Current Mailing Address: New Mailing Address:

123 NW 13TH STREET SUITE 208 BOCA RATON, FL 33432

FEI Number: 20-0645819 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:

HINES, JOHN M 123 NW 13TH STREET SUITE 208 BOCA RATON, FL 33432 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.

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SIGNATURE: Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES

Name: HINES, JOHN M

Address: 2996 SABALWOOD COURT City-St-Zip: DELRAY BEACH, FL 33445

Title: ST

Name: HINES, KRISTINE T Address: 2996 SABALWOOD COURT City-St-Zip: DELRAY BEACH, FL 33445

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN M HINES PRES 01/05/2012