

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000067181

FILED
Jan 26, 2011
Secretary of State

Entity Name: UNIVERSAL INSURANCE COMPANY OF NORTH AMERICA

Current Principal Place of Business:

101 ARTHUR ANDERSEN PARKWAY SUITE 220
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

101 ARTHUR ANDERSEN PARKWAY SUITE 220
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 20-1041714

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPINO, RICARDO A
101 ARTHUR ANDERSEN PKWY, STE. 220
SARASOTA, FL 34232 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: CD
Name: CASANAS, LUIS M
Address: PO BOX 71338
City-St-Zip: SAN JUAN, PR 00936

Title: DT
Name: PADILLA, JORGE L
Address: PO BOX 71338
City-St-Zip: SAN JUAN, PR 00396

Title: CEO
Name: MIRANDA MERLE, MONIQUE
Address: PO BOX 71338
City-St-Zip: SAN JUAN, PR 00936

Title: DS
Name: VEGA, JOSELY
Address: PO BOX 71338
City-St-Zip: SAN JUAN, PR 00936

Title: CFO
Name: BURNS, JOHN W
Address: PO BOX 50908
City-St-Zip: SARASOTA, FL 34232

Title: P
Name: ESPINO, RICARDO A
Address: PO BOX 50908
City-St-Zip: SARASOTA, FL 34232

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 BURNS

CFO

01/26/2011

Electronic Signature of Signing Officer or Director

Date