

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000139944

FILED
Feb 18, 2010
Secretary of State

Entity Name: GULFSTREAM PROPERTY AND CASUALTY INSURANCE COMPANY

Current Principal Place of Business:

6964 PROFESSIONAL PKWY EAST
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

6964 PROFESSIONAL PKWY EAST
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 04-3797801

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 EAST GAINES STREET
TALLAHASSEE, FL 32399 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC
Name: RIVERS, BRYAN
Address: 525 ASPEN GLADE CT
City-St-Zip: LEXINGTON, SC 29072

Title: D
Name: REDFEARN, KYLE
Address: 14416 HIGH HILL POND RD
City-St-Zip: TALLAHASSEE, FL 32309

Title: VTD
Name: MONTS, ELIZABETH R
Address: 2141 MUSKOGEE TRAIL
City-St-Zip: NOKOMIS, FL 34275

Title: D
Name: HUGGINS, REX W
Address: 405 S. COIT STREET
City-St-Zip: FLORENCE, SC 29501

Title: PCEO
Name: SATTTLER, MITCHEL S
Address: 7088 SADDLE CREEK LANE
City-St-Zip: SARASOTA, FL 34241

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: ELIZABETH R MONTS

VT

02/18/2010

Electronic Signature of Signing Officer or Director

Date