

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED  
Nov 11, 2008  
Secretary of State

DOCUMENT# P05000077546

Entity Name: ACA HOME INSURANCE CORP.

## Current Principal Place of Business:

901 PONCE DE LEON BLVD  
CORAL GABLES, FL 331343073

## New Principal Place of Business:

805 EXECUTIVE CENTER DRIVE W  
SUITE 300  
ST. PETERSBURG, FL 33702

## Current Mailing Address:

901 PONCE DE LEON BLVD  
CORAL GABLES, FL 331343073

## New Mailing Address:

805 EXECUTIVE CENTER DRIVE W  
SUITE 300  
ST. PETERSBURG, FL 33702

FEI Number: 56-2512990

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER  
200 E. 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: GREG STEWART

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LITTLE, JAMES B III  
Address: 312 23RD ST N  
City-St-Zip: BIRMINGHAM, AL 35203

Title: D ( ) Delete  
Name: AUER, JOHN F  
Address: 1817 BRIGHTWATERS BLVD NE  
City-St-Zip: ST PETERSBURG, FL 33704

Title: D ( ) Delete  
Name: FASTEAU, MARC  
Address: 77 SEEKONK CROSS RD  
City-St-Zip: GREAT BARRINGTON, MA 01230

Title: D ( ) Delete  
Name: MILKEY, KEVIN R  
Address: 605 14TH AVE NE  
City-St-Zip: ST PETERSBURG, FL 33701

Title: D ( ) Delete  
Name: HENDRICK, GREGORY S  
Address: 10 SHARON LANE  
City-St-Zip: PEMBROKE, BERMUDA HM 08,

Title: D ( ) Delete  
Name: NASON, ROBERT L  
Address: 30 RUSHBROKE LANE  
City-St-Zip: SHELTON, CT 06484

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: NASON, ROBERT L  
Address: 30 RUSHBROKE LANE  
City-St-Zip: SHELTON, CT 06484

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: GREG STEWART

Electronic Signature of Signing Officer or Director

VP

11/11/2008

Date