

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000082274

FILED  
Jan 12, 2011  
Secretary of State

Entity Name: NGM INSURANCE COMPANY

**Current Principal Place of Business:**

4601 TOUCHTON RD EAST  
SUITE 3400  
JACKSONVILLE, FL 32246 US

**New Principal Place of Business:**

**Current Mailing Address:**

4601 TOUCHTON RD EAST  
SUITE 3400  
JACKSONVILLE, FL 32246 US

**New Mailing Address:**

FEI Number: 02-0170490      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MACK, SUSAN E  
4601 TOUCHTON RD EAST  
SUITE 3400  
JACKSONVILLE, FL 32246 US

**Name and Address of New Registered Agent:**

FOX, BRUCE R  
4601 TOUCHTON RD EAST  
SUITE 3400  
JACKSONVILLE, FL 32246 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.

SIGNATURE: BRUCE R FOX

01/12/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: VAN BERKEL, THOMAS M  
Address: 4601 TOUCHTON RD E, STE 3400  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: T  
Name: KUHL, EDWARD J  
Address: 4601 TOUCHTON RD E, STE 3400  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: S  
Name: FOX, BRUCE R  
Address: 4601 TOUCHTON RD E, STE 3400  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: D  
Name: KOERNER, PHILIP D  
Address: 4601 TOUCHTON RD E, STE 3400  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: D  
Name: GUNTER, WILLIAM D JR.  
Address: 4601 TOUCHTON RD E, STE 3400  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: D  
Name: DELANEY, JOHN A  
Address: 4601 TOUCHTON RD E, STE 3400  
City-St-Zip: JACKSONVILLE, FL 32246 US

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: BRUCE R FOX

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01/12/2011

Electronic Signature of Signing Officer or Director

Date