# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 23, 2012**
**Secretary of State**

DOCUMENT# P06000058229

**Entity Name:** CENTAURI SPECIALTY INSURANCE COMPANY

**Current Principal Place of Business:**

5391 LAKEWOOD RANCH BLVD
SUITE 303
SARASOTA, FL 34240

**New Principal Place of Business:**

**Current Mailing Address:**

5391 LAKEWOOD RANCH BLVD
SUITE 303
SARASOTA, FL 34240

**New Mailing Address:**

**FEI Number: 20-3990357** **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: _____

Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: PD
Name: ESPINO, RICARDO A
Address: 5391 LAKEWOOD RANCH BLVD, STE 303
City-St-Zip: SARASOTA, FL 34240

Title: VD
Name: REES, LORA S
Address: 5391 LAKEWOOD RANCH BLVD, STE 303
City-St-Zip: SARASOTA, FL 34240

Title: D
Name: BARRALES, MIQUEL A
Address: 5391 LAKEWOOD RANCH BLVD, STE 303
City-St-Zip: SARASOTA, FL 34240

Title: D
Name: KEVANE, DONALD
Address: 5391 LAKEWOOD RANCH BLVD, STE 303
City-St-Zip: SARASOTA, FL 34240

Title: D
Name: SCHEFFLER, GUSTAVO
Address: 5391 LAKEWOOD RANCH BLVD, STE 303
City-St-Zip: SARASOTA, FL 34240

Title: VP
Name: HOWARD, BROCK
Address: 5391 LAKEWOOD RANCH BLVD, STE 303
City-St-Zip: SARASOTA, FL 34240

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: LORA S. REES VD 04/23/2012

Electronic Signature of Signing Officer or Director Date