2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2012
Secretary of State

DOCUMENT# P06000095499

Entity Name: AMERICAN INTEGRITY INSURANCE COMPANY OF FLORIDA

Current Principal Place of Business:

7650 W. COURTNEY CAMPBELL CSWY,
SUITE 1200
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

7650 W. COURTNEY CAMPBELL CSWY,
SUITE 1200
TAMPA, FL 33607

New Mailing Address:

FEI Number: 20-5239410 **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 ST
TALLAHASSEE, FL 323990000 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: D
Name: CLARK, DAVID LEWIS
Address: 4505 BLUFFVIEW
City-St-Zip: DALLAS, TX 75209

Title: D
Name: SOWELL, JAMES EDWIN
Address: 7000 VASSAR
City-St-Zip: DALLAS, TX

Title: D
Name: RITCHIE, ROBERT CRAIG
Address: 19340 GULF BLVD, #401
City-St-Zip: INDIAN SHORES, FL 33785

Title: D
Name: MARTIN, KEITH DOUGLAS
Address: 4201 SAN CARLOS
City-St-Zip: DALLAS, TX

Title: D
Name: SMATHERS, STEVEN EDWARD
Address: 3900 POTOMAC
City-St-Zip: DALLAS, TX 75205

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: DAVID LEWIS CLARK DIRE 03/07/2012

Electronic Signature of Signing Officer or Director — Date