2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000066010

FILED Apr 21, 2008 Secretary of State

Entity Name: HERITAGE INSURANCE GROUP OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 770 INDUSTRIAL DRIVE CRESTVIEW, FL 32539 **Current Mailing Address: New Mailing Address:** 770 INDUSTRIAL DRIVE PO BOX 778 CRESTVIEW, FL 32536 CRESTVIEW, FL 32539 US FEI Number: 26-0373309 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FOSTER, WILLIAM S 909 MAR WALT DRIVE **SUITE 1014** FORT WALTON BEACH, FL 32547 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MANN, SARAH D Name: Name:

770 INDUSTRIAL DRIVE Address: Address: City-St-Zip: CRESTVIEW, FL 32539 City-St-Zip:

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.

Ρ SIGNATURE: SARAH D MANN 04/21/2008