2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000084396

FILED Apr 22, 2008 Secretary of State

Entity Name: AMERICAN EMPLOYER INSURANCE SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business:

14004 ROOSEVELT BLVD., STE. 606 9280 BAY PLAZA BOULEVARD. SUITE 715

CLEARWATER, FL 33762 TAMPA, FL 33619

Current Mailing Address: New Mailing Address:

14004 ROOSEVELT BLVD., STE. 606 9280 BAY PLAZA BOULEVARD. SUITE 715

CLEARWATER, FL 33762 TAMPA, FL 33619

FEI Number: 26-0694468 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:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR

4TH FLOOR TAMPA, FL 33619 US MIAMI, FL 33145 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.

STANLEY, STEPHEN

9280 BAY PLAZA BOULEVARD. SUITE 715

SIGNATURE: STEPHEN STANLEY 04/22/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: GLASS, MARSHALL Name: GLASS, MARSHALL R

Address: 14004 ROOSEVELT BLVD., STE. 606 Address: 9280 BAY PLAZA BOULEVARD. SUITE 715

City-St-Zip: CLEARWATER, FL 33762 City-St-Zip: TAMPA, FL 33619

Title: () Delete Title: VP D () Change (X) Addition

Name: STEINBERG, STEVEN H

Address: 9280 BAY PLAZA BOULEVARD. SUITE 715

City-St-Zip: City-St-Zip: TAMPA, FL 33619

Title: () Delete Title: VP D () Change (X) Addition

Name: Name: MORAN, JAMES T

Address: 9280 BAY PLAZA BOULEVARD. SUITE 715

City-St-Zip: City-St-Zip: TAMPA, FL 33619

Title: () Delete Title: D () Change (X) Addition

Name: Name: MORAN, THOMAS D

Address: Address: 9280 BAY PLAZA BOULEVARD. SUITE 715

City-St-Zip: City-St-Zip: TAMPA, FL 33619

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: STEVEN H. STEINBERG VP 04/22/2008