

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000027121

FILED  
Apr 30, 2010  
Secretary of State

**Entity Name:** SUPERIOR INSURANCE OF THE TREASURE COAST INC.

**Current Principal Place of Business:**

2400 SE VETERENS MEMORIAL PARKWAY  
STE 203  
PORT ST LUCIE, FL 34983

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 7567  
PORT ST LUCIE, FL 34985

**New Mailing Address:**

**FEI Number:** 26-4522204

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARRIS, DEANA M  
307 SW FAIRWAY AVE  
PORT ST LUCIE, FL 34983 US

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

HARRIS, DEANA M  
641 NW MARION AVE  
PORT ST LUCIE, FL 34983 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:** DEANA HARRIS

04/30/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P,VP  
**Name:** HARRIS, DEANA M  
**Address:** 2400 SE VETERENS MEMORIAL PARKWAY STE 203  
**City-St-Zip:** PORT ST LUCIE, FL 34984

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:** DEANA HARRIS

P,VP

04/30/2010

Electronic Signature of Signing Officer or Director

Date