

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25816

FILED
Jan 08, 2010
Secretary of State

Entity Name: INFINITY ASSURANCE INSURANCE COMPANY

Current Principal Place of Business:

3700 COLONNADE PARKWAY
BIRMINGHAM, AL 35243

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 830189
BIRMINGHAM, AL 35283

New Mailing Address:

FEI Number: 75-1227771

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: GOBER, JAMES R
Address: 3700 COLONNADE PARKWAY
City-St-Zip: BIRMINGHAM, AL 35243

Title: PD
Name: GODWIN, GLEN N
Address: 3700 COLONNADE PARKWAY
City-St-Zip: BIRMINGHAM, AL 35243

Title: D
Name: SMITH, ROGER
Address: 3700 COLONNADE PARKWAY
City-St-Zip: BIRMINGHAM, AL 35243

Title: TD
Name: PRESTRIDGE, ROGER H
Address: 3700 COLONNADE PARKWAY
City-St-Zip: BIRMINGHAM, AL 35243

Title: SD
Name: SIMON, SAMUEL J
Address: 3700 COLONNADE PARKWAY
City-St-Zip: BIRMINGHAM, AL 35243

Title: D
Name: PITRONE, SCOTT
Address: 3700 COLONNADE PARKWAY
City-St-Zip: BIRMINGHAM, AL 35243 US

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: ROGER H PRESTRIDGE

VPT

01/08/2010

Electronic Signature of Signing Officer or Director

Date