

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P26478

FILED  
Jan 08, 2010  
Secretary of State

**Entity Name:** CAPITAL CITY INSURANCE COMPANY, INC.

**Current Principal Place of Business:**

3850 FERNANDINA ROAD  
COLUMBIA, SC 29210 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 212157  
COLUMBIA, SC 292212157 US

**New Mailing Address:**

**FEI Number:** 57-0810811

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** V  
**Name:** FRYER, MARK  
**Address:** 411 NATIONAL CT  
**City-St-Zip:** CHAPIN, SC 29036 US

**Title:** S  
**Name:** ALLEYNE, RICHARD  
**Address:** 88 PINE STREET  
**City-St-Zip:** NEW YORK, NY 10005 US

**Title:** P  
**Name:** FTIZPATRICK, STEPHEN  
**Address:** 88 PINE STREET  
**City-St-Zip:** NEW YORK, NY 10005 US

**Title:** T  
**Name:** FREDIANELLI, CELESKA  
**Address:** 28819 FRANKLIN ROAD  
**City-St-Zip:** SOUTHFIELD, MI 480341656 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:** RICHARD ALLEYNE

S

01/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date