

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30835

FILED  
Apr 25, 2012  
Secretary of State

**Entity Name:** INFINITY PREMIER INSURANCE COMPANY

**Current Principal Place of Business:**

3700 COLONNADE PARKWAY  
BIRMINGHAM, AL 35243

**New Principal Place of Business:**

3700 COLONNADE PARKWAY  
SUITE 600  
BIRMINGHAM, AL 35243

**Current Mailing Address:**

3700 COLONNADE PARKWAY  
BIRMINGHAM, AL 35243

**New Mailing Address:**

3700 COLONNADE PARKWAY  
SUITE 600  
BIRMINGHAM, AL 35243

**FEI Number:** 31-1287689

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FLORIDA OFFICE OF INSURANCE REGULATION  
200 EAST GAINES ST  
TALLAHASSEE, FL 32399 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

**OFFICERS AND DIRECTORS:**

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

Title: AT  
Name: CLARK, MARYLINN  
Address: 3700 COLONNADE PARKWAY  
City-St-Zip: BIRMINGHAM, AL 35243 US

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

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

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

Title: D  
Name: GODWIN, GLEN N  
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: MARY LINN CLARK

AT

04/25/2012

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

\_\_\_\_\_  
Date