2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000027303

Entity Name: ICC CAPITAL MANAGEMENT, INC.

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 390 N. ORANGE AVE, STE 2700 ORLANDO, FL 32801 **Current Mailing Address: New Mailing Address:** 390 N. ORANGE AVE, STE 2700 ORLANDO, FL 32801 FEI Number: 59-3310114 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: MCMURRY, GRANT I 390 N. ORANGE AVE, STE 2700 ORLANDO, FL 32801 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MCMURRY, GRANT I Name: Name: 390 N. ORANGE AVE., SUITE 2700 Address: Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: Title: Title: () Delete () Change () Addition Name: MCMURRY, BART Name: 390 N. ORANGE AVENUE, SUITE 2700 Address: Address: ORLANDO, FL 32801 City-St-Zip: City-St-Zip: Title: (X) Change () Addition Title: () Delete TINDAL, MICHAEL H. TINDAL, MICHAEL H Name: Name: 390 N. ORANGE AVENUE, SUITE 2700 390 N. ORANGE AVENUE, SUITE 2700 Address: Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801 Title: () Delete Title: () Change () Addition RICHEY, J. ANDREW Name: Name: Address: 390 N. ORANGE AVENUE, SUITE 2700 Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: Title: Title: (X) Change () Addition () Delete M/D CUTE, JENNIFER Name: OHANESIAN, ROBERT Name: 390 N. ORANGE AVENUE, SUITE 2700 Address: 390 N. ORANGE AVENUE, SUITE 2700 Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801 Title: () Delete Title: () Change (X) Addition Name: Name: LARKIN, JOHN 390 N. ORANGE AVENUE, SUITE 2700 Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32801

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: BART MCMURRY M 04/13/2009