

FPIC INSURANCE GROUP, INC.

P960000013107

September 27, 1999

Florida Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

700003000207--8  
-09/29/99--01046--010  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Re: FPIC Insurance Agency, Inc.

Dear Sir/Madam:

Enclosed is a Statement of Change of Registered Office or Registered Agent or Both for Corporations for the above named entity. Also enclosed is our check in the amount of \$35.00 representing the required filing fee.

If you have any questions, please call me.

Yours truly,

*Peggy A. Parks*

Peggy A. Parks  
Assistant Secretary/  
Director of Paralegal Services

Enclosures  
Agency/Letters/Division of Corporations.927

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: FPIC Insurance Agency, Inc.

2. The mailing address of the corporation is: 1000 Riverside Avenue, 8th Floor  
Jacksonville, FL 32204

3. Date of incorporation/qualification: February 12, 1990 Document number: P96000013107

4. The name and address of the current registered agent and office:

Charles W. Emanuel

1000 Riverside Avenue, 8th Floor

Jacksonville, FL 32204

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

John R. Byers

225 Water Street, Suite 1400

Jacksonville, FL 32202

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

(Signature of an officer, chairman or vice chairman of the board)

9/27/99  
(Date)

John R. Byers, Director

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

(Signature of Registered Agent)

9/27/99  
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

\*\*\* FILING FEE: \$35.00 \*\*\*