

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2006 8:00 am
Secretary of State

03-31-2006 90025 001 ***300.00

DOCUMENT # P96000013107

1. Entity Name
FPIC INSURANCE AGENCY, INC.



Principal Place of Business
1000 RIVERSIDE AVENUE
8TH FLOOR
JACKSONVILLE, FL 32204

Mailing Address
225 WATER ST
SUITE 1400
JACKSONVILLE, FL 32202 US

66007846



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03172006 Chg-P CR2E034 (11/05)

City & State

City & State

4. FEI Number
59-3359116

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COWN, ROBERTA G
225 WATER STREET, SUITE 1400
JACKSONVILLE, FL 32202

Name
Kenneth M. Kirschner

Street Address (P.O. Box Number is Not Acceptable)
300A Wharfside Way

City Jacksonville

FL

Zip Code 32207

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Kenneth M. Kirschner

Kenneth M. Kirschner

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/21/06
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP
NAME DALLERO, GARY M
STREET ADDRESS 225 WATER STREET STE 1400
CITY-ST-ZIP JACKSONVILLE, FL 32202 ☒ Delete

TITLE D, VP
NAME Divita, III, Charles
STREET ADDRESS 225 Water Street, Suite 1400
CITY-ST-ZIP Jacksonville, Florida 32202 ☒ Change ☐ Addition

TITLE DVPT
NAME THORPE, KIM D
STREET ADDRESS 225 WATER ST SUITE 1400
CITY-ST-ZIP JACKSONVILLE, FL 32202 ☒ Delete

TITLE D
NAME Sicilian, Louis V.
STREET ADDRESS 1000 Riverside Avenue, 8th Floor
CITY-ST-ZIP Jacksonville, Florida 32204 ☒ Change ☐ Addition

TITLE D
NAME WHITE, ROBERT E JR
STREET ADDRESS 1000 RIVERSIDE AVE, 8TH FLOOR
CITY-ST-ZIP JACKSONVILLE, FL 32204 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AS
NAME PARKS, PEGGY A
STREET ADDRESS 225 WATER ST, SUITE 1400
CITY-ST-ZIP JACKSONVILLE, FL 32202 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DS
NAME COWN, ROBERTA GOES
STREET ADDRESS 225 WATER STREET, SUITE 1400
CITY-ST-ZIP JACKSONVILLE, FL 32202 ☒ Delete

TITLE S
NAME Wortelboer, Robert L., Jr.
STREET ADDRESS 1000 Riverside Avenue, 8th Floor
CITY-ST-ZIP Jacksonville, Florida 32204 ☒ Change ☐ Addition

TITLE P
NAME DRISCOLL, KURT F
STREET ADDRESS 1000 RIVERSIDE AVE, 8TH FLOOR
CITY-ST-ZIP JACKSONVILLE, FL 32204 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Peggy A. Parks

Peggy A. Parks, Assistant Secretary 3/24/06 (904) 360-3605

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FPIC

INSURANCE GROUP, INC.

ATTACHMENT

66007846

March 29, 2006

Florida Department of State
Division of Corporations
Post Office Box 1500
Tallahassee, Florida 32302-1500

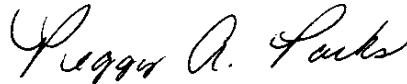
Re: FPIC Insurance Agency, Inc. (P96000013107)
First Professionals Insurance Company, Inc. (H81115)

Dear Sir/Madam:

Enclosed for filing are the 2006 For Profit Corporation Annual Reports for FPIC Insurance Agency, Inc. ("FPIC Agency") and First Professionals Insurance Company, Inc. ("First Professionals"), together with our check in the amount of \$300.00 representing the required filing fee for FPIC Agency and First Professionals, respectively.

Please call me at (904) 360-3605 if you have any questions.

Yours truly,



Peggy A. Parks
Assistant Corporate Secretary/
Director of Paralegal Services

Enclosure (Check No. 0000034195)
Annual Report/2006/FPIC Agency and First Professionals.032906