1/31/01-90261-010-$150.00-$150.00

2001 UNIFORM BUSINESS REPORT (UBR)

103

DOCUMENT # P96000013117

1. Entity Name
FPIC INSURANCE GROUP, INC.

FILED
01 FEB 16 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
225 WATER STREET, STE. 1400 JACKSONVILLE FL 32202 US	225 WATER STREET, STE. 1400 JACKSONVILLE FL 32204 US

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3359111 ☐ Applied For ☐ Not Applicable

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
BYERS, JOHN R 225 WATER STREET STE 1400 JACKSONVILLE FL 32202	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHAPIRO, DAVID M. M.D. 17301 FRANK ROAD ALMA FL 33920	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D 2152 Sea Fern Way St. George Island, FL 32328	☒ Change ☐ Addition LS
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP LUCKMAN, PAUL L P.O. BOX 44033 JAX FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D, P, CEO Byers, John R. 225 Water Street, Suite 1400 Jacksonville, FL 32202	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MURRAY, LOUIS C M.D. 900 S DELANEY ORLANDO FL 32806	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVP Cetin, Kurt J. 225 Water Street, Suite 1400 Jacksonville, FL 32202	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ACOSTA-RUA, GASTON J 2323 OAK STREET JACKSONVILLE FL 32204	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Devo, Pamela D. 225 Water Street, Suite 1400 Jacksonville, FL 32202	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BAGBY, RICHARD J 4138 SHORECREST ROAD ORLANDO FL 32804	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVP,S Cown, Roberta G. 225 Water Street, Suite 1400 Jacksonville, FL 32202	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARATTA, ROBERT O 2090 S.E. OCEAN BLVD STUART FL 34996	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Divita, Charles III 225 Water Street, Suite 1400 Jacksonville, FL 32202	☐ Change ☒ Addition

CR2E034 (10/00)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Peggy A. Parks Peggy A. Parks 1/24/01 (904) 354-2482
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Document # P96000013113 703

CONTINUATION
OF
NUMBERS 11 AND 12

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
Title Name St. Address City-ST-Zip	D Bridges, James W., M.D. 1190 N.W. 95th St., #110 Miami, FL 33150		
Title Name St. Address City-ST-Zip	D Gause, Curtis E., D.D.S. 1601 43rd St., North, #135 St. Petersburg, FL 33703		
Title Name St. Address City-ST-Zip	D Hagen, J. Stewart, M.D. 1420 South Brandywine Circle Ft. Myers, FL 33919		
Title Name St. Address City-ST-Zip	D Moya, Frank, M.D. 1320 S. Dixie Highway, Ste. 1060 Coral Gables, FL 33146		
Title Name St. Address City-ST-Zip	D Selander, Guy T., M.D. 1731 University Boulevard South Jacksonville, FL 32216		
Title Name St. Address City-ST-Zip	D Van Eldik, D.L., M.D. 208 Palm Circle Atlantis, FL 33462		
Title Name St. Address City-ST-Zip	D White, James G., M.D. 1688 W. Granada Blvd., Suite 2B Ormond Beach, FL 32174		
Title Name St. Address City-ST-Zip	D Yonge, Henry M. 3409 Chantarene Drive Pensacola, FL 32507		
Title Name St. Address City-ST-Zip	D, P, CEO ☑ **Delete** Russell, William R. 225 Water Street, Suite 1400 Jacksonville, FL 32202		
Title Name St. Address City-ST-Zip	EVP, CFO Thorpe, Kim D. 225 Water Street, Suite 1400 Jacksonville, FL 32202		

Document # P96000013117

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
Title Name St. Address City-ST-Zip	SVP Dallero, Gary M. 225 Water Street, Suite 1400 Jacksonville, FL 32202		
Title Name St. Address City-ST-Zip	VP ☑ **Delete** Ryan, Amy D. 1000 Riverside Avenue, 7th Floor Jacksonville, FL 32204		
Title Name St. Address City-ST-Zip	AS Parks, Peggy A. 225 Water Street, Suite 1400 Jacksonville, FL 32202		