2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Secretary of State DOCUMENT # P96000013117 02-23-2005 90053 043 ***150.00 FPIC INSURANCE GROUP, INC. Mailing Address Principal Place of Business 40021358 225 WATER STREET, STE. 1400 225 WATER STREET, STE. 1400 JACKSONVILLE, FL 32204 JACKSONVILLE, FL 32202 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01072005 Chq-P CR2E034 (10/03) Applied For 4. FEI Number City & State City & State 59-3359111 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BYERS, JOHN R Street Address (P.O. Box Number is Not Acceptable) 225 WATER STREET STE 1400 JACKSONVILLE, FL 32202 City Zip Code FL 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. Addition SVP Change TITLE TITI F n ☐ Detete NAME Divita, Charles III SHAPIRO, DAVID M. M.D. NAME STREET ADDRESS STREET ADDRESS 5810 N MONROE ST., STE 400 #304 225 Water Street, Suite 1400 TALLAHASSEE, FL 32303 CITY-ST-ZIP CITY-ST-ZIP Jacksonville,FL 32202 ☐ Change Addition DPCE Delete TITI F TITLE BYERS, JOHN R NAME Thackery, Becky NAME 225 Water Street, Suite 1400 STREET ADDRESS 225 WATER STREET, STE. 1400 STREET ADDRESS CITY-ST-7IP JACKSONVILLE, FL 32202 CITY-ST-ZIP Jacksonville,FL 32202 Change X Addition TITLE TITLE Delete AVP BAGBY, RICHARD J M.D. NAME Tripp, Pamela E. STREET ADDRESS 4138 SHORECREST ROAD STREET ADDRESS 225 Water Street, Suite 1400 Jacksonville, FL 32202 CITY-ST-ZIP CITY-ST-ZIP ORLANDO, FL 32804 ☐ Change ☐ Addition ☐ Defete TITLE HARVEY, PAMELA D MAME STREET ADDRESS STREET ADDRESS 225 WATER STREET, STE. 1400 CITY-ST-ZIF CITY-ST-ZIP JACKSONVILLE, FL 32202 ☐ Change ☐ Addition ☐ Delete TITLE **SVPS** TITLE COWN, ROBERTA G NAME 225 WATER STREET, STE. 1400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32202 CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE AS PARKS, PEGGY A NAME NAME 225 WATER STREET, STE. 1400 STREET ADDRESS

FILED Feb 23, 2005 8:00 am

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

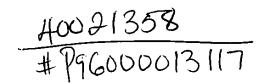
STREET ADDRESS

JACKSONVILLE, FL 32202

(904) 354-2482 Parks Peggy A. SIGNATURE: Daytime Phone Ext. 3287

ATTACHMENT

CONTINUATION OF NUMBERS 10 AND 11



10.	OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
Title	D	Title	☑ Change	
Name	Anderson, John K. Jr.	Name		
St. Address	1776 American Heritage Life Dr.	St. Address	135 Professional Drive, Suite 106	
City-ST-Zip	Jacksonville, Fl 32224	City-ST-Zip	Ponte Vedra Beach, FL 32082	
Title	D	- City 5 : 24p		
Name	Baratta, Robert O., M.D.			
St. Address	31 S.E. Harbor Point Drive			
City-ST-Zip	Stuart, FL 34996			
Title	D ☑ Delete			
Name	Bridges, James W., M.D.			
St. Address	8935 N.E. 10 th Avenue			
City-ST-Zip	Miami, FL 33138			
Title	D			
Name	Harden, M.C. III			
St. Address	806 Riverside Avenue			
City-ST-Zip	Jacksonville, FL 32204			
Title	D D			
Name	Kirschner, Kenneth M.			
St. Address	300A Wharfside Way			
City-ST-Zip	Jacksonville, FL 32207			
Title	-			
Name	McCoy, Terence P., M.D. 2412 West Plaza Drive			
St. Address				
City-ST-Zip	Tallahassee, FL 32308			
Title	D Dish John C			
Name	Rich, John G.			
St. Address	111 Broadway, Suite 1303			
City-ST-Zip	New York, NY 10006			
Title	D D CC - L D			
Name St. Address	Ruffier, Joan D.			
_	722 Alba Drive			
City-ST-Zip	Orlando, FL 32804	<u> </u>		
Title	D Salandar Cuu T. M.D.			
Name	Selander, Guy T., M.D.			
St. Address	1731 University Boulevard South			
City-ST-Zip	Jacksonville, FL 32216			
Title	D White James G. M.D.			
Name	White, James G., M.D.			
St. Address	1688 W. Granada Blvd., Suite 2B Ormond Beach, FL 32174			
City-ST-Zip Title	SVP			
Name	Dallero, Gary M.			
St. Address	225 Water Street, Suite 1400			
City-ST-Zip	Jacksonville, FL 32202			
Title	EVP, CFO			
	,	İ		
Name	Thorpe, Kim D.			
St. Address	225 Water Street, Suite 1400			
City-ST-Zip	Jacksonville, FL 32202			