

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000013117

FILED
Jan 11, 2010
Secretary of State

Entity Name: FPIC INSURANCE GROUP, INC.

Current Principal Place of Business:

225 WATER STREET, STE. 1400
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

1000 RIVERSIDE AVENUE
8TH FLOOR
JACKSONVILLE, FL 32204 US

Current Mailing Address:

225 WATER STREET, STE. 1400
JACKSONVILLE, FL 32202 US

New Mailing Address:

1000 RIVERSIDE AVENUE
8TH FLOOR
JACKSONVILLE, FL 32204 US

FEI Number: 59-3359111

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYERS, JOHN R
225 WATER STREET STE 1400
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

BYERS, JOHN R
1000 RIVERSIDE AVENUE
8TH FLOOR
JACKSONVILLE, FL 32204 US

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:

01/11/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD
Name: KIRSCHNER, KENNETH M
Address: 50 NORTH LAURA STREET, SUITE 2900
City-St-Zip: JACKSONVILLE, FL 32202

Title: DPCE
Name: BYERS, JOHN R
Address: 1000 RIVERSIDE AVENUE, 8TH FLOOR
City-St-Zip: JACKSONVILLE, FL 32204

Title: D
Name: ANDERSON, JOHN K JR
Address: 1548 THE GREENS WAY, SUITE 1
City-St-Zip: JACKSONVILLE, FL 32050

Title: CFO
Name: DIVITA, CHARLES III
Address: 1000 RIVERSIDE AVENUE, 8TH FLOOR
City-St-Zip: JACKSONVILLE, FL 32204

Title: AS
Name: PARKS, PEGGY A
Address: 1000 RIVERSIDE AVENUE, 8TH FLOOR
City-St-Zip: JACKSONVILLE, FL 32204

Title: D
Name: BARATTA, ROBERT O MD
Address: 31 S E HARBOR POINT DRIVE
City-St-Zip: STUART, FL 34996

I hereby 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 all other like empowered.

SIGNATURE: PEGGY A. PARKS

AS

01/11/2010

Electronic Signature of Signing Officer or Director

Date