2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000031548

FILED Apr 10, 2009 Secretary of State

Entity Name: FIRST FLORIDIAN AUTO AND HOME INSURANCE COMPANY

	rincipal Place of Business:	New Principal Place of Business:
7840 WOC TAMPA, FI	DDLAND CTR BLVD L 33614	
Current M	lailing Address:	New Mailing Address:
POB 3009 TAMPA, FI		
El Number:	: 59-3372141 FEI Number Applied Fo	or () FEI Number Not Applicable () Certificate of Status Desired ()
Name and	Address of Current Registered A	gent: Name and Address of New Registered Agent:
P O BOX 6 200 E. GAI	JANCIAL OFFICER 5200 (32314-6200) INES ST SSEE, FL 323990000 US	
	named entity submits this statement e of Florida.	for the purpose of changing its registered office or registered agent, or both,
BIGNATUR		
	Electronic Signature of Registe	-
Election Car	mpaign Financing Trust Fund Contribution	n ().
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Γitle: Name:	D () Delete RUSSELL, DOUGLAS K	Title: () Change () Addition
\ddress:	ONE TOWER SQUARE HARTFORD, CT 06183	Name: Address: City-St-Zip:
Address: City-St-Zip: Fitle: Name: Address:		Address:
Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip:	HARTFORD, CT 06183 CD () Delete TOC YDLOWSKI, GREGORY C ONE TOWER SQUARE	Address: City-St-Zip: Title: () Change () Addition Name: Address:
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Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address:	HARTFORD, CT 06183 CD () Delete TOC YDLOWSKI, GREGORY C ONE TOWER SQUARE HARTFORD, CT 06183 D () Delete WELCH, RICHARD 10 CHESNUT ST., SUITE 300 WORCESTER, MA 01608 DPT () Delete FANDEL, EDWARD J. 7840 WOODLAND CENTER BLVD	Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: PD (X) Change () Addition Name: ALANIZ, HECTOR J Address: 7840 WOODLAND CENTER BLVD

Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RENE HERNANDEZ S 04/10/2009