

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90208 018 ***150.00

DOCUMENT # P96000046207

1. Entity Name
FLORIDA SELECT INSURANCE COMPANY



Principal Place of Business

**1819 MAIN STREET
SUITE 700
SARASOTA, FL 34236**

Mailing Address

**1819 MAIN STREET
SUITE 700
SARASOTA, FL 34236**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01062006

Chg-P

CR2E034 (11/05)

4. FEI Number
59-3390361

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fees Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CHIEF FINANCIAL OFFICER
P.O. BOX 6200 32314-6200
200 E. GAINES ST.
TALLAHASSEE, FL 32399**

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
LEFLER, WALTER M
1819 MAIN STREET, SUITE 1101
SARASOTA, FL 34236** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
Nolen, Bobby L
3760 River Run Dr
BIRMINGHAM AL 35243** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DC
LACEFIELD, DAVID W
3760 RIVER RUN DRIVE
BIRMINGHAM, AL 35242** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PC
LACEFIELD, DAVID W
3760 RIVER RUN DR
BIRMINGHAM, AL 35243** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
EMERY, C. DAVID
3760 RIVER RUN DRIVE
BIRMINGHAM, AL 43360** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
WRIGHT, FRED H
3760 RIVER RUN DRIVE
SARASOTA, FL 34236** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Wright, Fred H
3760 River Run Dr
BIRMINGHAM AL 35243** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VSD
GONZALEZ, ARTHUR
3760 RIVER RUN DRIVE
SARASOTA, FL 34236** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VT
Heen, Bruce W
3760 River Run Dr
BIRMINGHAM, AL 35243** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
FORD, KERRY W
1819 MAIN STREET, SUITE 1101
SARASOTA, FL 34236** ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/06 205-920-7138

Date

Daytime Phone #

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000046207

1. Entity Name
FLORIDA SELECT INSURANCE COMPANY



ATTACHMENT
60034609

Principal Place of Business
1819 MAIN STREET
SUITE 700
SARASOTA, FL 34236

Mailing Address
1819 MAIN STREET
SUITE 700
SARASOTA, FL 34236

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04052006 Chg-P CR2E034 (11/05)

4. FEI Number
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Applied For
Not Applicable

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7. Name and Address of New Registered Agent

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P.O. BOX 6200 32314-6200
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TALLAHASSEE, FL 32399

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME LEFLER, WALTER M
STREET ADDRESS 1819 MAIN STREET, SUITE 1101
CITY-ST-ZIP SARASOTA, FL 34236

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

TITLE DC ☐ Delete
NAME LACEFIELD, DAVID W
STREET ADDRESS 3760 RIVER RUN DRIVE
CITY-ST-ZIP BIRMINGHAM, AL 35242

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

TITLE V ☐ Delete
NAME EMERY, C. DAVID
STREET ADDRESS 3760 RIVER RUN DRIVE
CITY-ST-ZIP BIRMINGHAM, AL 43360

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

TITLE TD ☐ Delete
NAME WRIGHT, FRED H
STREET ADDRESS 3760 RIVER RUN DRIVE
CITY-ST-ZIP SARASOTA, FL 34236

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

TITLE VSD ☐ Delete
NAME GONZALEZ, ARTHUR
STREET ADDRESS 3760 RIVER RUN DRIVE
CITY-ST-ZIP SARASOTA, FL 34236

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

TITLE V ☐ Delete
NAME FORD, KERRY W
STREET ADDRESS 1819 MAIN STREET, SUITE 1101
CITY-ST-ZIP SARASOTA, FL 34236

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT 60034609
~~#P96000046207~~
OFFICERS AND DIRECTORS
FLORIDA SELECT INSURANCE COMPANY
March 31, 2006

Officers

David W. Lacefield	President
Norman W. Gayle	Chief Executive Officer
Bobby L. Nolen	Executive Vice President
C. David Emery	Senior Vice President and Chief Claims Officer
Bruce W. Heen	Senior Vice President, Accounting and Treasurer
Stephen P. Russell	Senior Vice President, Actuarial
Russell K. Crouch	Vice President, Special Services
Kerry W. Ford	Vice President, Operations
Danny E. Laffey	Vice President, Information Systems
Teresa S. McCoy	Vice President, Underwriting
Robert J. McLaughlin, Jr.	Secretary

Directors

David W. Lacefield, Chairman
John W. McCullough
Bobby L. Nolen
Fred H. Wright