

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000080941

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: FLORIDA HOSPITALITY MUTUAL INSURANCE COMPANY

**Current Principal Place of Business:**

4601 TOUCHTON ROAD EAST  
BLDG. 300, STE. 3150  
JACKSONVILLE, FL 32246

**New Principal Place of Business:**

**Current Mailing Address:**

4601 TOUCHTON ROAD EAST  
BLDG. 300, STE. 3150  
JACKSONVILLE, FL 32246

**New Mailing Address:**

FEI Number: 59-6077796      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPVC ( ) Delete  
Name: BOND, WILLIAM JR  
Address: 4601 TOUCHTON RD EAST, STE 3150  
City-St-Zip: JACKSONVILLE, FL 32246

Title: DT ( ) Delete  
Name: BRADLEY, RUEL L JR  
Address: 4601 TOUCHTON RD EAST STE. 3150  
City-St-Zip: JACKSONVILLE, FL 32246

Title: DS ( ) Delete  
Name: RICHARDSON, MARY S  
Address: 4601 TOUCHTON RD EAST, STE 3150  
City-St-Zip: JACKSONVILLE, FL 322465

Title: DASC ( ) Delete  
Name: GABEL, GEORGE D JR  
Address: 4601 TOUCHTON RD EAST, STE 3150  
City-St-Zip: JACKSONVILLE, FL 32246

Title: DC ( ) Delete  
Name: HEALAN, JACK B JR  
Address: 4601 TOUCHTON RD EAST STE. 3150  
City-St-Zip: JACKSONVILLE, FL 32246

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DAT ( ) Change (X) Addition  
Name: SEAY, JOSEPH G  
Address: 4601 TOUCHTON RD EAST STE. 3150  
City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: HEATHER L. MCCOY

VP

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date

P96000080941

pd 4/30/09

Annual Reporting  
Florida Hospitality Mutual Insurance Company  
59-6077796

Name & Address #7

Title: D  
Name: Banks, Walter L  
Address: 4601 Touchton Road East Ste 3150  
Jacksonville, Florida 32246