

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000067044

FILED
Feb 07, 2012
Secretary of State

Entity Name: FRONTLINE INSURANCE MANAGERS INC.

Current Principal Place of Business:

7131 BUSINESS PARK LANE
SUITE 300
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

PO BOX 952709
LAKE MARY, FL 32795 US

New Mailing Address:

FEI Number: 13-3963337

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VENDITTELLI, LOUIS V ESQ
7131 BUSINESS PARK LANE
SUITE 300
LAKE MARY, FL 32746 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

OFFICERS AND DIRECTORS:

Title: DCEO
Name: PORTER, LANIER M
Address: 7131 BUSINESS PARK LANE SUITE 300
City-St-Zip: LAKE MARY, FL 32746

Title: C
Name: KING, WILLIS T JR
Address: 7131 BUSINESS PARK LANE SUITE 300
City-St-Zip: LAKE MARY, FL 32746

Title: CFO
Name: TREUIL, BENJAMIN A
Address: 7131 BUSINESS PARK LANE SUITE 300
City-St-Zip: LAKE MARY, FL 32746

Title: DPS
Name: PORTER, LEMAN M
Address: 7131 BUSINESS PARK LANE SUITE 300
City-St-Zip: LAKE MARY, FL 32746

Title: DVPT
Name: WILLIAMS, DWAYNE R
Address: 7131 BUSINESS PARK LANE SUITE 300
City-St-Zip: LAKE MARY, FL 32746

Title: D
Name: HUMPHREY, HAROLD
Address: 7131 BUSINESS PARK LANE SUITE 300
City-St-Zip: LAKE MARY, FL 32746

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: DWAYNE WILLIAMS

VP

02/07/2012

Electronic Signature of Signing Officer or Director

Date