

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000096033

FILED
Jan 30, 2009
Secretary of State

Entity Name: FLORIDA HOME BUILDERS INSURANCE, INC.

Current Principal Place of Business:

2600 CENTENNIAL PLACE
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

PO BOX 15459
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 59-3478874

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOREHAND, JOHN W
125 S GADSDEN ST
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

FOREHAND, JOHN W
2600 CENTENNIAL PLACE
1
TALLAHASSEE, FL 32308 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:

01/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CHMN () Delete
Name: HARPER, ROBERT
Address: 2600 CENTENNIAL PLACE
City-St-Zip: TALLAHASSEE, FL 32308

Title: CEO () Delete
Name: LITTLEFIELD, CAROLYN B
Address: 2600 CENTENNIAL PLACE
City-St-Zip: TALLAHASSEE, FL 32308

Title: SEC () Delete
Name: ZICHELLA, AL
Address: 2600 CENTENNIAL PLACE
City-St-Zip: TALLAHASSEE, FL 32308

Title: TREA () Delete
Name: FOWKE, CHUCK
Address: 2600 CENTENNIAL PLACE
City-St-Zip: TALLAHASSEE, FL 32308

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHMN (X) Change () Addition
Name: COPPENBARGER, RON
Address: 2600 CENTENNIAL PLACE
City-St-Zip: TALLAHASSEE, FL 32308

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

Title: TREA (X) Change () Addition
Name: ZICHELLA, AL
Address: 2600 CENTENNIAL PLACE
City-St-Zip: TALLAHASSEE, FL 32308

Title: DIR (X) Change () Addition
Name: FOWKE, CHUCK
Address: 2600 CENTENNIAL PLACE
City-St-Zip: TALLAHASSEE, FL 32308

Title: DIR () Change (X) Addition
Name: WISEMAN, JOHN
Address: 2600 CENTENNIAL PLACE
City-St-Zip: TALLAHASSEE, FL 32308

Title: DIR () Change (X) Addition
Name: RAHN, MIKE
Address: 2600 CENTENNIAL PLACE
City-St-Zip: TALLAHASSEE, FL 32308

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: CAROLYN LITTLEFIELD

CEO

01/30/2009

Electronic Signature of Signing Officer or Director

Date