2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2011
Secretary of State

DOCUMENT# P98000075598

Entity Name: CYPRESS PROPERTY & CASUALTY INSURANCE COMPANY

Current Principal Place of Business:

13901 SUTTON PARK DR SOUTH
STE 310
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

13901 SUTTON PARK DR SOUTH
STE 310
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 59-3540757 **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 323990000 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: CD
Name: FISHMAN, ALAN H
Address: 6 WILLOW PLACE
City-St-Zip: BROOKLYN, NY 11201 US

Title: PD
Name: BRAUNSTEIN, JOSEPH F JR
Address: 201 S SHIPWRECK AVE
City-St-Zip: PONTE VEDRA BEACH, FL 32081 US

Title: D
Name: ADAM, REINMANN W
Address: 14 COWDIN LN
City-St-Zip: CHAPPAQUA, NY 10519

Title: CED
Name: HARGER, GARY R
Address: 4632 SWILCAN BRIDGE LANE S
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: VD
Name: LAWSON, GLENN S
Address: 4245 STUDIO PARK AVE
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: D
Name: CUDDY, BROOK L
Address: 180 EAST END AVENUE APT 16B
City-St-Zip: NEW YORK, NY 10128

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: GLENN S. LAWSON VD 02/24/2011

Electronic Signature of Signing Officer or Director — Date