2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004664

Entity Name: INLAND PROTECTION FINANCING CORPORATION

FILED
Apr 17, 2024
Secretary of State
3582062484CC

Current Principal Place of Business:

C/O STATE BOARD OF ADMINISTRATION 1801 HERMITAGE BLVD. TALLAHASSEE, FL 32308

Current Mailing Address:

C/O STATE BOARD OF ADMINISTRATION 1801 HERMITAGE BLVD. TALLAHASSEE, FL 32308

FEI Number: 59-3404559 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCAULEY, MICHAEL P C/O STATE BOARD OF ADMINISTRATION 1801 HERMITAGE BLVD. 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title D Title CEO

Name SPENCER, CHRIS Name TAYLOR, LAMAR

Address 200 EAST GAINES STREET Address 1801 HERMITAGE BLVD STE 100

City-State-Zip: TALLAHASSEE FL 32399 City-State-Zip: TALLAHASSEE FL 32308

Title D Title T

Name COOPER, TANYA Name ALONZO, BENJAMIN

Address 200 EAST GAINES STREET Address 1801 HERMITAGE BLVD., SUITE 100

City-State-Zip: TALLAHASSEE FL 32399 City-State-Zip: TALLAHASSEE FL 32308

Title S Title D

NameMCCAULEY, MICHAEL PNamePERCIVAL, JAMES "JIMMY"Address1801 HERMITAGE BLVD, SUITE 100Address200 EAST GAINES STREETCity-State-Zip:TALLAHASSEE FL 32308City-State-Zip:TALLAHASSEE FL 32399

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL P. MCCAULEY

CORPORATE SECRETARY 04/17/2024