2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2016
Secretary of State
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Entity Name: LIBERTY AMERICAN INSURANCE SERVICES, INC.

Current Principal Place of Business:

ONE BALA PLAZA, SUITE 100
BALA CYNWYD, PA 19004

Current Mailing Address:

ONE BALA PLAZA, SUITE 100
BALA CYNWYD, PA 19004 US

FEI Number: 59-1059110

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	CEO / DIRECTOR	Title	TREASURER
Name	O'LEARY, ROBERT D.	Name	KELLY, MICHAEL
Address	ONE BALA PLAZA, SUITE 100	Address	ONE BALA PLAZA, SUITE 100
City-State-Zip:	BALA CYNWYD PA 19004	City-State-Zip:	BALA CYNWYD PA 19004

Title	DIRECTOR
Name	MAGUIRE, JAMES J. JR.
Address	ONE BALA PLAZA, SUITE 100
City-State-Zip:	BALA CYNWYD PA 19004

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: ROBERT D. O'LEARY CEO 04/15/2016

Electronic Signature of Signing Officer/Director Detail — Date