

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G06573

Entity Name: AMERICAN INSURANCE MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

1093 CLUBHOUSE BLVD
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

1093 CLUBHOUSE BLVD
NEW SMYRNA BEACH, FL 32168

FEI Number: 59-3349750

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUGHES, F.I.
1093 CLUBHOUSE BLVD
NEW SMYRNA BEACH, FL 32168 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 P
Name HUGHES, F.I.
Address 1093 CLUBHOUSE BLVD.
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title VP
Name SPOON, TERRI
Address 5870 SHALE COURT
City-State-Zip: WINTER PARK FL 32792

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: HUGHES, F. I.

PRES

02/04/2014

Electronic Signature of Signing Officer/Director Detail

Date