2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2018
Secretary of State
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Entity Name: FLORIDA HEALTH PROFESSIONALS LEGAL EXPENSE INSURANCE, INC.

Current Principal Place of Business:

9310 OLD KINGS ROAD SOUTH
SUITE 701
JACKSONVILLE, FL 32257

Current Mailing Address:

9310 OLD KINGS ROAD SOUTH
SUITE 701
JACKSONVILLE, FL 32257 US

FEI Number: 02-0590632

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAM R HUSEMAN PA
9310 OLD KINGS ROAD SOUTH
SUITE 701
JACKSONVILLE, FL 32257 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: WILLIAM R HUSEMAN 02/23/2018

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	SECRETARY	Title	CEO, DIRECTOR
Name	HUSEMAN, KRISTINE L	Name	HUSEMAN, WILLIAM R ESQ.
Address	9310 OLD KINGS ROAD SOUTH SUITE 701	Address	9310 OLD KINGS ROAD SOUTH SUITE 701
City-State-Zip:	JACKSONVILLE FL 32257	City-State-Zip:	JACKSONVILLE FL 32257

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: KRISTINE L. HUSEMAN SECRETARY 02/23/2018

Electronic Signature of Signing Officer/Director Detail — Date