

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000033016

Entity Name: TRUMP INSURANCE, INC.

Current Principal Place of Business:

13139 66TH STREET NORTH
LARGO, FL 33773

Current Mailing Address:

13139 66TH STREET NORTH
LARGO, FL 33773

FEI Number: 14-1876832

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRUMP, WILLIAM F
13139 66TH STREET NORTH
LARGO, FL 33773 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 PSTD
Name TRUMP, WILLIAM F
Address 13139 66TH STREET NORTH
City-State-Zip: LARGO FL 33773

Title SOD
Name TRUMP, AIMEE S
Address 13139 66TH STREET NORTH
City-State-Zip: LARGO FL 33773

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: AIMEE TRUMP

CFO

04/04/2014

Electronic Signature of Signing Officer/Director Detail

Date