2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2024
Secretary of State
4619396693CC

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Entity Name: SECURITY FIRST INSURANCE COMPANY

Current Principal Place of Business:

1001 BROADWAY AVENUE
ORMOND BEACH, FL 32174

Current Mailing Address:

1001 BROADWAY AVENUE
ORMOND BEACH, FL 32174 US

FEI Number: 75-3176411

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E GAINES ST
TALLAHASSEE, FL 32314 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	CFO, DIRECTOR
Name	BECKER-JONES, CLIVE
Address	1001 BROADWAY AVENUE
City-State-Zip:	ORMOND BEACH FL 32174

Title	DIRECTOR
Name	BLEIWISE, CHARLES DAVID
Address	1001 BROADWAY AVENUE
City-State-Zip:	ORMOND BEACH FL 32174

Title	DIRECTOR
Name	BLEIWISE-GREENFIELD, SUSAN DEBRA
Address	1001 BROADWAY AVENUE
City-State-Zip:	ORMOND BEACH FL 32174

Title	PRESIDENT, SECRETARY, DIRECTOR
Name	BURT DEVRIESE, MELISSA
Address	1001 BROADWAY AVENUE
City-State-Zip:	ORMOND BEACH FL 32174

Title	DIRECTOR
Name	BEDNER, BRIAN
Address	1001 BROADWAY AVENUE
City-State-Zip:	ORMOND BEACH FL 32174

Title	DIRECTOR
Name	BLEIWISE, HARRY ROBERT
Address	1001 BROADWAY AVENUE
City-State-Zip:	ORMOND BEACH FL 32174

Title	PRESIDENT, CEO, DIRECTOR
Name	BURT, W. LOCKWOOD
Address	1001 BROADWAY AVENUE
City-State-Zip:	ORMOND BEACH FL 32174

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: MELISSA BURT DEVRIESE PRESIDENT 04/24/2024

Electronic Signature of Signing Officer/Director Detail — Date