## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000077546

Entity Name: ASI HOME INSURANCE CORP.

**Current Principal Place of Business:** 

1 ASI WAY N

ST. PETERSBURG, FL 33702

**Current Mailing Address:** 

1 ASI WAY N

ST. PETERSBURG. FL 33702

FEI Number: 56-2512990 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES STREET TALLAHASSEE, FL 32399 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

FILED Jan 14, 2015

**Secretary of State** 

CC0291245352

Officer/Director Detail:

Title D Title

Name AUER, JOHN F Name FASTEAU, MARC

Address 1 ASI WAY Address 1 ASI WAY

City-State-Zip: ST. PETERSBURG FL 33702 City-State-Zip: ST. PETERSBURG FL 33702

Title D Title D

Name MILKEY, KEVIN R Name COOPER, CHARLES

Address 1 ASI WAY Address 1 ASI WAY

City-State-Zip: ST. PETERSBURG FL 33702 City-State-Zip: ST. PETERSBURG FL 33702

Title D Title VP

Name HENDRICK, GREG Name BOSTICK, ANGEL

Address 1 ASI WAY Address 1 ASI WAY

City-State-Zip: ST. PETERSBURG FL 33702 City-State-Zip: ST. PETERSBURG FL 33702

Title VP Title VP

Name FOURNET, MARY FRANCES Name MCCRINK, PATRICK

Address 1 ASI WAY Address 1 ASI WAY

City-State-Zip: ST. PETERSBURG FL 33702 City-State-Zip: ST. PETERSBURG FL 33702

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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: TREVOR C HILLIER

VICE PRESIDENT

01/14/2015

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title VP Title VP

Name BRUBAKER, PHILIP Name FJARE, TANYA

Address 1 ASI WAY Address 1 ASI WAY

City-State-Zip: ST. PETERSBURG FL 33702 City-State-Zip: ST. PETERSBURG FL 33702

Title VP Title VP

Name HILLIER, TREVOR C Name HANNON, JEFF

Address 1 ASI WAY Address 1 ASI WAY

City-State-Zip: ST. PETERSBURG FL 33702 City-State-Zip: ST PETERSBURG FL 33702