2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2014
Secretary of State
CC4277544047

DOCUMENT# P06000048722

Entity Name: TEQUESTA INSURANCE GROUP, INC.

Current Principal Place of Business:

218 SOUTH US HWY ONE
SUITE 300
TEQUESTA, FL 33469

Current Mailing Address:

218 SOUTH US HWY ONE
SUITE 300
TEQUESTA, FL 33469

FEI Number: 56-2570739

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TEQUESTA AGENCY, INC.
218 SOUTH US HWY ONE
STE 300
TEQUESTA, FL 33469 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	CEO	Title	VP
Name	KASTEN, MARK J	Name	HUTCHISON, TODD P
Address	10460 SE SILVER PALM WAY	Address	211 COLONY ROAD
City-State-Zip:	TEQUESTA FL 33469	City-State-Zip:	JUPITER FL 33469
Title	VP	Title	PRES
Name	SULLIVAN, PATRICIA W	Name	MAYFIELD, GEOFFREY E
Address	653 CASTLE DRIVE	Address	1453 NE HIGH HAMMOCK LN
City-State-Zip:	PALM BEACH GARDENS FL 33410	City-State-Zip:	JENSEN BEACH FL 34957

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: MARK J. KASTEN CEO 01/21/2014

Electronic Signature of Signing Officer/Director Detail — Date