2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2014
Secretary of State
CC7477761176

DOCUMENT# P11000106275

Entity Name: MCCORMICK INSURANCE INC.

Current Principal Place of Business:

9000 SHERIDAN ST
SUITE 130
PEMBROKE PINES, FL 33024

Current Mailing Address:

9000 SHERIDAN ST
SUITE 130
PEMBROKE PINES, FL 33024 US

FEI Number: 45-4015263

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAK COURT
SUITE A
TAMPA, FL 33612 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	PRESIDENT, CEO
Name	MCCORMICK, KEVIN P
Address	9000 SHERIDAN STREET SUITE 130
City-State-Zip:	PEMBROKE PINES FL 33024

Title	VP, CFO
Name	BAMOND, ALBERTO
Address	9000 SHERIDAN STREET SUITE 130
City-State-Zip:	PEMBROKE PINES FL 33024

Title	VP, COO
Name	FATAL, KENLEY
Address	9000 SHERIDAN STREET SUITE 130
City-State-Zip:	PEMBROKE PINES FL 33024

Title	VP
Name	MCCORMICK, KEVIN P SR.
Address	11241 NW 23RD STREET
City-State-Zip:	PEMBROKE PINES FL 33026

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: KENLEY FATAL VP-MANAGER 04/10/2014

Electronic Signature of Signing Officer/Director Detail — Date