

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000080941

Entity Name: FHM INSURANCE COMPANY

Current Principal Place of Business:

4601 TOUCHTON ROAD EAST
BLDG. 300, STE. 3150
JACKSONVILLE, FL 32246

Current Mailing Address:

4601 TOUCHTON ROAD EAST
BLDG. 300, STE. 3150
JACKSONVILLE, FL 32246

FEI Number: 59-6077796

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES ST.
200 E. GAINES ST.
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

Officer/Director Detail :

Title DVC
Name BOND, WILLIAM JR
Address 4601 TOUCHTON RD EAST, STE 3150
City-State-Zip: JACKSONVILLE FL 32246

Title DS
Name RICHARDSON, MARY S
Address 4601 TOUCHTON RD EAST, STE 3150
City-State-Zip: JACKSONVILLE FL 32246

Title DC
Name HEALAN, JACK BJR
Address 4601 TOUCHTON RD EAST STE. 3150
City-State-Zip: JACKSONVILLE FL 32246

Title DT
Name SEAY, JOSEPH G
Address 4601 TOUCHTON RD EAST STE. 3150
City-State-Zip: JACKSONVILLE FL 32246

Title CHIEF RISK OFFICER, ASST. TREASURER
Name JOHN, LEMINE A
Address 4601 TOUCHTON ROAD EAST BLDG. 300, STE. 3150
City-State-Zip: JACKSONVILLE FL 32246

Title PRESIDENT
Name LUPINO, MATTHEW
Address 4601 TOUCHTON ROAD EAST BLDG. 300, STE. 3150
City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR
Name BANKS, WALTER
Address 4601 TOUCHTON ROAD EAST BLDG. 300, STE. 3150
City-State-Zip: JACKSONVILLE FL 32246

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: JOHN A LEMINE

CHIEF RISK OFFICER

03/19/2019

Electronic Signature of Signing Officer/Director Detail

Date