

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 02, 2018
Secretary of State
CC4285527790

Entity Name: FRONTLINE INSURANCE MANAGERS INC.

Current Principal Place of Business:

500 INTERNATIONAL PARKWAY
LAKE MARY, FL 32746

Current Mailing Address:

PO BOX 952709
LAKE MARY, FL 32795 US

FEI Number: 13-3963337

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VENDITTELLI, LOUIS V ESQ
500 INTERNATIONAL PARKWAY
LAKE MARY, FL 32746 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 DCEO
Name PORTER, LANIER M
Address 500 INTERNATIONAL PARKWAY
City-State-Zip: LAKE MARY FL 32746

Title C
Name KING, WILLIS TJR
Address 500 INTERNATIONAL PARKWAY
City-State-Zip: LAKE MARY FL 32746

Title CFO
Name TREUIL, BENJAMIN A
Address 500 INTERNATIONAL PARKWAY
City-State-Zip: LAKE MARY FL 32746

Title DPS
Name PORTER, LEMAN M
Address 500 INTERNATIONAL PARKWAY
City-State-Zip: LAKE MARY FL 32746

Title DVPT
Name WILLIAMS, DWAYNE R
Address 500 INTERNATIONAL PARKWAY
City-State-Zip: LAKE MARY FL 32746

Title D
Name HUMPHREY, HAROLD
Address 500 INTERNATIONAL PARKWAY
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR
Name KING, EMILY
Address 500 INTERNATIONAL PARKWAY
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR
Name VENDITTELLI, LOUIS
Address 500 INTERNATIONAL PARKWAY
City-State-Zip: LAKE MARY FL 32746

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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: DWAYNE WILLIAMS

EVP

02/02/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SOTO, ALEJANDRO
Address 500 INTERNATIONAL PARKWAY
City-State-Zip: LAKE MARY FL 32746

Title DIRECTOR
Name HUDSON, WARREN
Address 500 INTERNATIONAL PARKWAY
City-State-Zip: LAKE MARY FL 32746