2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 07, 2014
Secretary of State
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Entity Name: FIDELITY GROUP INSURANCE PROFESSIONALS LLC

Current Principal Place of Business:

3400 COLLEGE BLVD
STE 200
LEAWOOD, KS 66211

Current Mailing Address:

3400 COLLEGE BLVD
STE 200
LEAWOOD, KS 66211

FEI Number: 31-1819007

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Authorized Person(s) Detail :

Title	MEMBER	Title	MEMBER
Name	SEILER, CRAIG J	Name	MALLOUK, PETER
Address	3400 COLLEGE BLVD., STE 200	Address	3400 COLLEGE BLVD., STE 200
City-State-Zip:	LEAWOOD KS 66211	City-State-Zip:	LEAWOOD KS 66211

Title	MEMBER
Name	HISSONG, ROBERT J
Address	3400 COLLEGE BLVD., STE 200
City-State-Zip:	LEAWOOD KS 66211

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG J SEILER MEMBER 03/07/2014

Electronic Signature of Signing Authorized Person(s) Detail — Date