2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2016
Secretary of State
CC0111725053

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Entity Name: ASSUREDPARTNERS CAPITAL, INC.

Current Principal Place of Business:

200 COLONIAL CENTER PARKWAY
SUITE 150
LAKE MARY, FL 32476

Current Mailing Address:

200 COLONIAL CENTER PARKWAY
SUITE 150
LAKE MARY, FL 32476

FEI Number: 45-2712335

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	DIRECTOR, CHAIRMAN, CEO
Name	HENDERSON, JIM W
Address	200 COLONIAL CENTER PARKWAY #150
City-State-Zip:	LAKE MARY FL 32476

Title	DIRECTOR, SR. VP, ASST. SECRETARY
Name	VREDENBURG, PAUL
Address	200 COLONIAL CENTER PARKWAY #150
City-State-Zip:	LAKE MARY FL 32476

Title	DIRECTOR
Name	DONNINI, DAVID A
Address	300 N. LASALLE STREET SUITE 5600
City-State-Zip:	CHICAGO IL 60654

Title	CHIEF CORPORATE COUNSEL
Name	KINNETT, STANLEY K II
Address	200 COLONIAL CENTER PARKWAY SUITE 150
City-State-Zip:	LAKE MARY FL 32476

Title	DIRECTOR, PRESIDENT, COO, SECRETARY
Name	RILEY, THOMAS E
Address	200 COLONIAL CENTER PARKWAY #150
City-State-Zip:	LAKE MARY FL 32476

Title	SR. VP
Name	CURTIS, DEAN J
Address	200 COLONIAL CENTER PKWY SUITE 150
City-State-Zip:	LAKE MARY FL 32746

Title	SR. VP
Name	ANDERSON, ERIC
Address	200 COLONIAL CENTER PARKWAY SUITE 150
City-State-Zip:	LAKE MARY FL 32476

Title	CHIEF COUNSEL, EXEC. VP
Name	SMITH, WALTER L
Address	200 COLONIAL CENTER PARKWAY SUITE 150
City-State-Zip:	LAKE MARY FL 32476

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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: PAUL VREDENBURG DIRECTOR 01/25/2016

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	COHEN, AARON D
Address	300 N. LASALLE ST. STE 5600
City-State-Zip:	CHICAGO IL 60654

Title	DIRECTOR
Name	YARBROUGH, STUART
Address	200 COLONIAL CENTER PARKWAY SUITE 150
City-State-Zip:	LAKE MARY FL 32476

Title	SR VP
Name	GARDNER, MATTHEW P
Address	200 COLONIAL CENTER PARKWAY
City-State-Zip:	LAKE MARY FL 32746

Title	DIRECTOR
Name	JESCHKE, STEPHEN J
Address	300 N. LASALLE ST. STE 5600
City-State-Zip:	CHICAGO IL 60654

Title	SR VP
Name	DEAL, STEVEN C
Address	200 COLONIAL CENTER PARKWAY SUITE 150
City-State-Zip:	LAKE MARY FL 32476