No. <b>C 162641</b>		Due no later than Sep 30, 2014 Annual Report Form  1. Mailing Address: Correct in this box if needed.  FIRST PROTECTIVE INSURANCE GROUP, INC.  KAREN BARGER 600 LUCKIE DRIVE SUITE 200 BIRMINGHAM AL 35223		2. Registered Agent and Address (NO PO BOX)				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE					C T CORPORATION SYSTEM			
				921 S ORCHARD ST STE G BOISE ID 83705 USA  3. New Registered Agent Signature:*				
4. Corporations: Enter Name	es and Busin	ess Addresses of Preside	ent, Secretary, and Directors. Treasure	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT /	ANDREW S MARTIN		600 LUCKIE DRIVE SUITE 200	BIRMINGHAM	AL	USA	35223	
			600 LUCKIE DRIVE SUITE 200	BIRMINGHAM	AL	USA	35223	
TREASURER PAUL R WELLS		LLS	2801 HIGHWAY 280 S	BIRMINGHAM	AL	USA	35223	
SECRETARY DEBORAH J LONG		LONG	2801 HIGHWAY 280 S	BIRMINGHAM	AL	USA	35223	
DIRECTOR	STEVEN G \	Walker	2801 HIGHWAY 280 S	BIRMINGHAM	AL	USA	35223	
5. Organized Under the Laws of:		6. Annual Report must						
AL C 162641		Signature: Paul R Wells		Date: 07/28/2014				
		Name (type or print): Paul R Wells		Title: Treasurer				
Processed 07/28/2014	* Electronically provided signatures are accepted as original signatures.							