

No. C 182263		Due no later than Mar 31, 2013 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. ALLIED SPECIALTY INSURANCE, INC. CHRISTEN LONG 10451 GULF BLVD TREASURE ISLAND FL 33706-4814 USA		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 USA			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	RICHARD W D'APRILE	10451 GULF BLVD	TREASURE ISLAND	FL	USA	33706-4814	
DIRECTOR	CHARLES T LANDRUM	10451 GULF BOULEVARD	TREASURE ISLAND	FL	USA	33706-4814	
TREASURER	SHARON L KEEFE	10451 GULF BOULEVARD	TREASURE ISLAND	FL	USA	33706-4814	
SECRETARY	SHARON L KEEFE	10451 GULF BOULEVARD	TREASURE ISLAND	FL	USA	33706-4814	
5. Organized Under the Laws of: FL C 182263		6. Annual Report must be signed.* Signature: Richard W. D'Aprile Name (type or print): Richard W. D'Aprile					
		Date: 03/26/2013 Title: President					
Processed 03/26/2013 * Electronically provided signatures are accepted as original signatures.							