

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 23, 2013
Secretary of State
CC8854562449

Entity Name: PALOMAR INSURANCE CORPORATION

Current Principal Place of Business:

4525 EXECUTIVE PARK DRIVE
SUITE 202
MONTGOMERY, AL 36116

Current Mailing Address:

4525 EXECUTIVE PARK DRIVE
SUITE 202
MONTGOMERY, AL 36116

FEI Number: 63-0346774

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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 CEO
Name CRAFT, TONY
Address 4525 EXECUTIVE PARK DRIVE, SUITE
 202
City-State-Zip: MONTGOMERY AL 36116

Title COO
Name SKIPPER, CULLMAN L
Address 4525 EXECUTIVE PARK DRIVE, SUITE
 202
City-State-Zip: MONTGOMERY AL 36116

Title CP
Name SKIPPER, GEORGE WIII
Address 307 SKIPPER DRIVE
City-State-Zip: JACKSON AL 36545

Title VC
Name SKIPPER, RICHARD C
Address 307 SKIPPER DRIVE
City-State-Zip: JACKSON AL 36545

Title VC
Name SKIPPER, DAVID O
Address 307 SKIPPER DRIVE
City-State-Zip: JACKSON AL 36545

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: CULLMAN LEONARD SKIPPER

**CHIEF OPERATING
OFFICER**

01/23/2013

Electronic Signature of Signing Officer/Director Detail

Date