

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000167482

Entity Name: KEYSTONE SPECIALTY INSURANCE GROUP, INC.

Current Principal Place of Business:

3100 FALLING LEAF CT
SUITE 200
COLUMBIA, MO 65201

Current Mailing Address:

P. O. BOX 6040
COLUMBIA, MO 65205 US

FEI Number: 20-2351227

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD
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

Officer/Director Detail :

Title	PRES	Title	VP
Name	WALKER, ROGER D	Name	SCHMIDT, KIRK W
Address	1711 S. FAIRVIEW RD	Address	2905 FOXDALE DR
City-State-Zip:	COLUMBIA MO 65203	City-State-Zip:	JEFFERSON CITY MO 65109
Title	CEO		
Name	FRENCH, JAMES C		
Address	4905 THORNBROOK RIDGE		
City-State-Zip:	COLUMBIA MO 65203		

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: ROGER D. WALKER

PRESIDENT

04/05/2013

Electronic Signature of Signing Officer/Director Detail

Date