

1.) CORPORATION NAME:

Bankers Insurance Services, Inc.

DUE DATE: **12/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CENTER, 16TH FLOOR
1111 EAST MAIN STREET**

SCC ID NO: **F1733155**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

FL

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11101 ROOSEVELT BLVD NORTH

CITY/ST/ZIP: ST PETERSBURG, FL 33716

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	WILBUR MARTIN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	11101 ROOSEVELT BLVD NORTH		
CITY/ST/ZIP/CO:	ST PETERSBURG, FL 33716		

NAME:	IAN B BARBER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	11101 ROOSEVELT BLVD N		
CITY/ST/ZIP/CO:	ST PETERSBURG, FL 33716		

NAME:	BRIAN J KESNECK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	11101 ROOSEVELT BLVD N		
CITY/ST/ZIP/CO:	ST PETERSBURG, FL 33716		

NAME:	WHITLEY N WARD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1500 KINGS HWY		
CITY/ST/ZIP/CO:	PORT CHARLOTTE, FL 33980		

NAME:	RICHARD G TORRA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	11101 ROOSEVELT BLVD N		
CITY/ST/ZIP/CO:	ST PETERSBURG, FL 33716		

NAME:	JOHN A STRONG	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11101 ROOSEVELT BLVD N		
CITY/ST/ZIP/CO:	ST PETERSBURG, FL 33716		

NAME:	ANNA ARENA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	11101 Roosevelt Blvd. N.		
CITY/ST/ZIP/CO:	St. Petersburg, FL 33716		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ IAN B BARBER	IAN B BARBER, VICE PRESIDENT	12/27/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.