Instruction 1(b).

## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>LLOYD ROBERT W</u>							2. Issuer Name and Ticker or Trading Symbol BROWN & BROWN INC [ BRO ]									all app Direc	olicable)	10	erson(s) to Issuer 10% Owner Other (specify	
(Last) (First) (Middle) 220 S. RIDGEWOOD AVE.						3. Date of Earliest Transaction (Month/Day/Year) 07/01/2013									Vice President					
Street) DAYTONA BEACH FL 32114  (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv Line) X	,					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution Date,			3. Transa Code (		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				4 and 5) Secur Benef		cially d Following	6. Ownersh Form: Direc (D) or Indire (I) (Instr. 4)	of Ind Et Benef Owne	lirect ficial ership
									Code	v	Amount	( <i>A</i>	A) or D)	Price	•	Transa	action(s) 3 and 4)		(Instr.	. 4,
Common Stock, \$.10 par value (SIP) 07/01/2						013			A		16,284		Α	\$0.0000		38	3,214 <sup>(1)</sup>	D		
Common Stock, \$.10 par value (SIP) 07/01/2					/2013	013			A		9,305(2)	)5 <sup>(2)</sup> A \$(		\$0.0	0000	47,519 <sup>(3)</sup>		D		
Common Stock, \$.10 par value																	246	D		
Common Stock, \$.10 par value (PSP)																20	),976 <sup>(4)</sup>	D		
Common Stock, \$.10 par value																2	,893 <sup>(5)</sup>	I	By 4	401k
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution or Exercise (Month/Day/Year) if any		n Date,	Date, Transacti		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expiration (Month/Mont	on Da Day/Yo		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amount or Numbe of Title Shares		ount	ıt r		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Bene Owne ct (Instr	direct ficial ership	

## **Explanation of Responses:**

- 1. These securities were granted pursuant to the Company's 2010 Stock Incentive Plan ("SIP"). Full ownership will not vest until the satisfaction of performance-based conditions established in connection with
- 2. These securities were granted pursuant to the Company's 2010 Stock Incentive Plan. Full ownership will not vest until the satisfaction of certain conditions established in connection with this grant.
- 3. Number of shares may vary due to dividend reinvestment.
- 4. These securities were granted pursuant to the Company's Performance Stock Plan ("PSP"). Based on the satisfaction of conditions established pursuant to the PSP, the Reporting Person has voting rights and dividend entitlement with respect to a portion of these shares based on the satisfaction of certain performance-based criteria, but full ownership will not vest until the satisfaction of additional conditions.
- 5. Based upon information supplied by the Plan recordkeeper. Number of shares varies periodically based on contributions to plan.

Robert W. Llovd

07/03/2013

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.