2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# 691008

Entity Name: A AALL AMERICAN INSURANCE OF TALLAHASSEE, INC.

Current Principal Place of Business:

903 NORTH MONROE
TALLAHASSEE, FL 32303

New Principal Place of Business:

803 CARY MEMORIAL DRIVE
PENSACOLA, FL 32505

Current Mailing Address:

200 BEVERLY PKWY
PENSACOLA, FL 32505

New Mailing Address:

803 CARY MEMORIAL DRIVE
PENSACOLA, FL 32505

FEI Number: 59-2143302 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HALL, RICK
903 NORTH MONROE STREET
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

HALL, RICK
803 CARY MEMORIAL DRIVE
PENSACOLA, FL 32505 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: 04/28/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: HALL, RICK,
Address: 903 NORTH MONROE
City-St-Zip: TALLAHASSEE, FL 0,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HALL, RICK,
Address: 803 CARY MEMORIAL DRIVE
City-St-Zip: PENSACOLA, FL 32505

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICK W HALL PD 04/28/2008
Electronic Signature of Signing Officer or Director — Date