2005 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # F02000004950 01-28-2005 90022 008 ***150.00 1. Entity Name REBSAMEN INSURANCE, INC. Principal Place of Business Mailing Address 40008193 1500 RIVERFRONT DRIVE PO BOX 3198 LITTLE ROCK, AR 72203 LITTLE ROCK, AR 72202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01192005 Cha-P CR2E034 (10/03) City & State City & State Applied For 4. FEI Number 71-0621654 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Recuired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code City 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PDC Delete President & Chief Operating □ Change TITLE TITÍ F Officer NAME MCDOWELL, ALLEN J NAME James R. Hill 5455 SCENIC DRIVE STREET ADDRESS STREET ADDRESS 1500 Riverfront Drive LITTLE ROCK, AR 72207 CITY-ST-ZIP CITY-ST-ZIP ttle Rock, AR TITLE ☐ Delete TITLE Secretary/Treasurer, SVP Joel R. Styles Addition STRINGFELLOW, WILLIAM R NAME NAME STREET ADDRESS 10 HAYFIELD ROAD STREET ADDRESS 1500 Riverfront Drive LITTLE ROCK, AR 72207 CITY-ST-ZIP CITY-ST-ZIP Little Rock, AR Chairman and CEO ST TITLE Delete TITLE Change Addition Fred B. Stone HOGG, LINDA NAME NAME STREET ADDRESS 1817 RIVER HEIGHTS STREET ADDRESS 1500 Riverfront Drive CITY-ST-ZIP LITTLE ROCK, AR 72202 CITY-ST-ZIP Little Rock, AR 72202 Chairman of Board; Director Change TITLE ☐ Delete TITLE X Addition GLOVER, PAT NAME David L. Bowlin STREET ADDRESS 588 DODSON LANE STREET ADDRESS 6200 Poplar Avenue CITY-ST-ZIP RUSSELLVILLE, AR 72802 CITY-ST-ZIP Memphis, TN 38119 X Delete TITLE TITLE Director Change X Addition Fred B. Stone NAME ASKEW, WILLIAM E NAME 3708 WIMBLETON LANE STREET ADDRESS STREET ADDRESS 1500 Riverfront Drive CITY-ST-ZIP BIRMINGHAM, AL 35223 CITY-ST-ZIP Little Rock, AR 72202 Director X Addition TITLE X Defete TITLE Change FLEISCHAUER, JACK JR, NAME NAME James R. Hill STREET ADDRESS 2116 NORTH SPRUCE STREET ADDRESS 1500 Riverfront Drive Little Rock, AR 72202 CITY-ST-ZIP LITTLE ROCK, AR 72207 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachrifont with an address; Tytin alphaber like empowered.

William R. St SIGNATURE AND TYPED OR PI

SIGNATURE:

Mellow, Executive Vice Presiden

FILED Jan 28, 2005 8:00 am

501-661-4800

JOHN K. BAKER W. CHRISTOPHER BARRIER SHERRY P. BARTLEY STEVE BAUMAN R. T. BEARD, III C. DOUGLAS BUFORD, JR. FREDERICK K. CAMPBELL CHARLES B. CLIETT, JRS DOAK FOSTER' BYRON FREELAND ALLAN GATES' JOSEPH W. GELZINE JACK D. GRUNDFEST HAROLD W. HAMLIN JEFFREY W. HATFIELD L. KYLE HEFFLEY DONALD H. HENRY HERMANN IVESTER WALTER E. MAY LANCE R. MILLER STUART P. MILLER T. ARK MONROE, III' ANNE S. PARKER LYN P. PRUITT CHRISTOPHER T. ROGERS JOHN S. SELIG LEIGH ANNE SHULTS STAN D. SMITH MARCELLA J. TAYLOR JEFFREY THOMAS NICHOLAS THOMPSON WILLIAM H.L. WOODYARD, III, P.A.

WALTER G. WRIGHT, JR

ATTACHMENT

LAW OFFICES # 1000004 MICHELLE H. C.
DAVID P. GI
AMMIE E. H
LINDSEY K. HO
ELIG, GATES & WOODWARD

ATTACHMENT

40008193

MITCHELL, WILLIAMS, 950

MARGADET V. HO
MARGADET V. HO SELIG, GATES & WOODYARD, P.L.L.C.

425 WEST CAPITOL AVENUE, SUITE 1800 LITTLE ROCK, ARKANSAS 72201-3525 TELEPHONE 501-688-8800 FAX 501-688-8807

> 5414 PINNACLE POINT DRIVE, SUITE 500 ROGERS, ARKANSAS 72758-8131 TELEPHONE 479-273-9561 FAX 479-273-0527

> > WRITER'S DIRECT DIAL 501-370-4230

January 24, 2005

AMMIE E. HARRIS LINDSEY K. HOWARD MARGARET A. JOHNSTON TONY JUNEAU MARY MICHELLE MAHONY LANEY GOSSETT MCCONNELL ⁴KEN MISKEN P. DELANNA PADILLA JENNIFER R. PIERCE CHERYL L. REINHART

JENNIFER A. RONNEL JEFFREY L. SINGLETON DERRICK W. SMITH SHANNON SHORT SMITH JEFFREY L. SPILLYARDS

COUNSEL JEFFREY H. DIXON ROBERT M. EUBANKS III. P.A. S. HUBERT MAYES, JR. 'H. MAURICE MITCHELL JEAN D. STOCKBURGER RICHARD A. WILLIAMS, P.A.

1 ALSO ADMITTED IN DISTRICT OF COLUMBIA
2 ALSO ADMITTED IN COLORADO
3 ALSO ADMITTED IN THE U.S. PATENT
AND TRADEMARK OFFICE
4 NOT ADMITTED IN ARKANSAS; ADMITTED
IN NEW YORK AND NEW JEASEY
5 ALSO ADMITTED IN TEXAS
5 ALSO ADMITTED IN ARIZONA AND TEXAS
6 ALSO ADMITTED IN ARIZONA AND TEXAS
ALL OTHERS ADMITTED IN ARKANSAS

Division of Corporations P. O. Box 1500 Tallahassee, FL 32302-1500

> Re: 2005 for Profit Corporation Annual Report - Rebsamen Insurance, Inc.

Ladies and Gentlemen:

Enclosed are the original and one copy of the 2005 For Profit Corporation Annual Report for Rebsamen Insurance, Inc., along with our firm check in the amount of \$150.00 to cover the filing fee. Please return a file-stamped copy to me in the enclosed envelope.

Thank you for your assistance concerning this matter.

Very truly yours,

MITCHELL, WILLIAMS, SELIG, GATES & WOODYARD, P.L.L.C.

Tracy Bruce

By

Tracy Bruce, CLA Certified Paralegal

/tb

Mr. William R. Stringfellow (w/enc.)

Ms. Leah Caradine (w/o enc.)

840919,1

ATTACHMENT

2005 FOR PROFIT CORPORATION

ANNOAL REPORT																	
DOCUMENT # F0200004950 1. Entity Name REBSAMEN INSURANCE, INC.						,	1/00	081	93	·							
Principal Place of Business Mailing Address					7	7	100	00'	1 .								
1500 RIVERI Little Rock	Front Drive , ar 72202	PO BOX 3198 Little Rock, ar 72203															
2. Principal Place of Business		3. Mailing Address															
Suite, Apt. #, etc.		Suite, Apt. #, etc.				01192005	Chg-P	CR	2E034 (10/03)								
City & Stat	<u></u>	City & State				4. FEI Number 71-062			─	pplied For ot Applicable							
Zip 	Country	Zip	-Coun	try —		5. Certificate			\$8.75 Ad Fee Require								
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent													
A T AARDAR (TIALI AVATEL)				Name .													
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PŁANTATION, FL 33324				Street Address (P.O. Box Number Is Not Acceptable)					·								
•				City	City FL Zip Code												
8. 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. I am familiar with, and accept the obligations of registered agent.																	
SIGNATURE																	
						00 May Be d to Fees											
10.	OFFICERS AND I	DIRECTORS	11.			ADDITIONS/	CHANGES 1	O OFFICERS	AND DIRECTOR	IS IN 11							
TITLE	PDC	Delete	TITLE	:	Pres	ident&	Chief	Operati	ng 🗆 Change								
NAME	MCDOWELL, ALLEN J		NAM		Jame	es R. Hi	.11	Officer	:	,							
STREET ADDRESS CITY-ST-ZIP	5455 SCENIC DRIVE LITTLE ROCK, AR 72207			ET ADORESS - ST-ZIP	1500	Riverf	ront D	rive									
TITLE	 – – – – – – – – – – – – – – – – – – 		TITLE			: <u>le Rock</u> :etary/T			Change	Addition							
NAME	STRINGFELLOW, WILLIAM R			E	Secretary/Treasurer, SVP Change Claddition Joel R. Styles												
STREET ADDRESS	10 HAYFIELD ROAD			ET ADDRESS	1500	Riverf	ront D	rive									
CITY-ST-ZIP	LITTLE ROCK, AR 72207			-ST-ZIP		le_Rock		72202									
TITLE NAME	ST ~ HOGG, LINDA	- Deleta	. TITLE	_	Chai	rman an I B. Sto	id CEO		Change	Addition							
STREET ADDRESS	1817 RIVER HEIGHTS		STRE			Riverf		rive									
CITY-ST-ZIP	LITTLE ROCK, AR 72202		СПУ			le Rock											
TITLE	AS	☐ Delete	TITLE	:	Chai	rman of	Board	; Direc	tor Change								
NAME	GLOVER, PAT		NAMI	E	Davi	d L. Bo	wlin			-							
STREET ADDRESS CITY-ST-ZIP	588 DODSON LANE RUSSELLVILLE, AR 72802			et address -st-zip	6200	Poplar	Avenu	e		j							
MILE	D	X Delete	TITLE			his, TN ctor	38 L L	9	Change	(X) Addition							
NAME	ASKEW, WILLIAM E	41100	NAM	E	Fred	l B. Sto				4,							
STREET ADDRESS CITY-ST-ZIP	3708 WIMBLETON LANE					Riverf											
TITLE	BIRMINGHAM, AL 35223	X Delete	-			le_Rock	, AR	72202	[7] Sheer	X Addition							
NAME	FLEISCHAUER, JACK JR,	ALI Delete	TITLE		Jame	ctor s R. Hi	11		Change	TOT MODITION							
STREET ADDRESS	2116 NORTH SPRUCE					Riverf		rive									
CITY-ST-ZIP	LITTLE ROCK, AR 72207			-ST-ZIP	<u>Litt</u>	<u>le Rock</u>	, AR	<u> 72202 </u>									
12. I hereby d	certify that the information supplied with	this filing does not qualify for	the exe	mption state	d in Sec	tion 119.07(3)(12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and encurate and that my singeture shall have the same legal affect as if made under onth, that I am an officer or director.										

SIGNATURE: _

501-661-4800