2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 23, 2004 8:00 am Secretary of State DOCUMENT # K31071 04-23-2004 90214 010 ***150.00 SECURITY NATIONAL INSURANCE COMPANY Principal Place of Business Mailing Address 54039441 5701 STIRLING ROAD 5701 STIRLING ROAD DAVIE, FL 33314-7431 DAVIE, FL 33314-7431 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04192004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-0109120 Not Applicable Country _ _ . Zip Country \$8.75 Additional -5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CHIEF FINANCIAL OFFICER Street Address (P.O. Box Number is Not Acceptable) P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 Zip Code FL 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TD ☐ Delete TITLE ☐ Addition TITLE SUTTON, RANDY NAME NAME STREET ADDRESS 5701 STIRLING ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DAVIE, FL 33314** TITLE Delete TITLE Change Addition President Director Noonan, Simon NOONAN, SIMON NAME NAME STREET ADDRESS 5701 STIRLING ROAD STREET ADDRESS STO I STIRLING RD CITY-ST-ZIP **DAVIE, FL 33314** CITY-ST-ZIF ☐ Change Addition ☐ Delete TITLE HAMMOND, GREGORY MAME 5701 STIRLING RD STREET ADDRESS STREET ADDRESS CITY-ST-7/P **DAVIE, FL 33314** CITY-ST-ZIP VICEHES, DENAFANIJR. J SCHAFANIJR. J ☐ Change Delete TITLE Addition TITLE Vice Aes. / Director SIMON, DONALD NAME 23mAL STREET ADDRESS 5701 STIRLING ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DAVIE, FL 33314** TITLE ☐ Delete TITLE Change Addition DEHEER, GEORGE NAME 5701 STIRLING RD STREET ADDRESS STREET ADDRESS **DAVIE, FL 33314** CITY-ST-ZIP CITY-ST-ZIP Delete Vice Pres/ Director ☐ Change TITLE TITLE HAYNE, RICHARD NAME BURTCH, DOUGLAS

FILED

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 attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-7IP

5701 STIRLING RD

DAVIE, FL 33314

STREET ADDRESS

CITY-ST-ZIP

5701 STIRLING BD

DAVIE, FL38314

Grogory Hammand Secretary 4/20/04 SIGNATURE: