

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000073830

FILED
Feb 08, 2011
Secretary of State

Entity Name: OMEGA INSURANCE SOLUTIONS, INC.

Current Principal Place of Business:

199 AVENUE K SE
WINTER HAVEN, FL 33880

New Principal Place of Business:

1933 E EDGEWOOD DR, SUITE 102
LAKELAND, FL 33803

Current Mailing Address:

199 AVENUE K SE
WINTER HAVEN, FL 33880

New Mailing Address:

1933 E EDGEWOOD DR, SUITE 102
LAKELAND, FL 33803

FEI Number: 20-4957984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, JEFF
199 AVENUE K SE
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

THOMPSON, JEFF
1933 E EDGEWOOD DR, SUITE 102
LAKELAND, FL 33803 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:

Electronic Signature of Registered Agent

02/08/2011

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: THOMPSON, JEFF T
Address: 1933 E EDGEWOOD DR, SUITE 102
City-St-Zip: LAKELAND, FL 33803 US

I hereby 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 all other like empowered.

SIGNATURE: JEFF THOMPSON

PRES

02/08/2011

Electronic Signature of Signing Officer or Director

Date