

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000020243

FILED
Feb 22, 2011
Secretary of State

Entity Name: BENNETT INSURANCE GROUP, INC.

Current Principal Place of Business:

12708 SAN JOSE BLVD
SUITE 1B
JACKSONVILLE, FL 32223 US

New Principal Place of Business:

Current Mailing Address:

12708 SAN JOSE BLVD
SUITE 1B
JACKSONVILLE, FL 32223 US

New Mailing Address:

FEI Number: 01-0921932 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BENNETT, DENICE C
12708 SAN JOSE BLVD
SUITE 1B
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

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

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BENNETT, DENICE C
Address: 620 FENWICK LANE
City-St-Zip: SAINT JOHNS, FL 32259 US

Title: VP
Name: BENNETT, VANCE E
Address: 620 FENWICK LANE
City-St-Zip: SAINT JOHNS, FL 32259 US

Title: S
Name: BENNETT, DENICE C
Address: 620 FENWICK LANE
City-St-Zip: SAINT JOHNS, FL 32259 US

Title: T
Name: BENNETT, VANCE E
Address: 620 FENWICK LANE
City-St-Zip: SAINT JOHNS, FL 32259 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: DENICE BENNETT

PRES

02/22/2011

Electronic Signature of Signing Officer or Director

Date