

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004650

Entity Name: SOUTHERN FARM BUREAU PROPERTY INSURANCE
COMPANY**Current Principal Place of Business:**1800 EAST COUNTY LINE RD.
RIDGELAND, MS 39157**Current Mailing Address:**PO BOX 1800
RIDGELAND, MS 39158**FEI Number:** 64-0849246**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
200 E. GAINES STREET
TALLAHASSEE, FL 32399-0000 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

Date

Officer/Director Detail :

Title CHAIRMAN
Name ANDERSON, RONALD
Address 9516 AIRLINE HIGHWAY
City-State-Zip: BATON ROUGE LA 70815

Title PRESIDENT
Name WALLACE, ROBERT D.
Address 1800 E. COUNTY LINE
City-State-Zip: RIDGELAND MS 39157

Title VP, SECRETARY
Name WARREN, LYDIA W
Address 1800 EAST COUNTY LINE ROAD
City-State-Zip: RIDGELAND MS 39157

Title DIRECTOR
Name MCCORMICK, MIKE
Address 6310 I-55 NORTH
City-State-Zip: JACKSON MS 39211

Title DIRECTOR
Name OTT, HARRY
Address 724 KNOX ABBOTT DRIVE
City-State-Zip: CAYCE-WEST COLUMBIA SC 29033

Title VC
Name HOBLOCK, JOHN
Address 5700 SOUTHWEST 34TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name SHAWCROFT, DON
Address P.O. BOX 5647
City-State-Zip: DENVER CO 80217

Title DIRECTOR
Name VEACH, RANDY
Address P.O. BOX 31
City-State-Zip: LITTLE ROCK AR 72203

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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: LYDIA WARREN**SECRETARY****03/09/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	VP, CFO
Name	BLACKBURN, JUDY
Address	P.O. BOX 1800
City-State-Zip:	RIDGELAND MS 39158-1800