

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 263326

FILED
Apr 29, 2011
Secretary of State

Entity Name: NATIONS INSURANCE GROUP, INC.

Current Principal Place of Business:

1235 MICCOSUKEE RD.
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 4343
TALLAHASSEE, FL 32315 US

New Mailing Address:

FEI Number: 59-1008745 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JONES, WILLIAM R III
1235 MICCOSUKEE RD.
TALLAHASSEE, FL 32308 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: JONES, WILLIAM R III
Address: 1235 MICCOSUKEE RD
City-St-Zip: TALLAHASSEE, FL 32308

Title: VP
Name: CRISWELL, KAREN
Address: 1235 MICCOSUKEE RD
City-St-Zip: TALLAHASSEE, FL 32308

Title: ST
Name: JONES, ANGIE
Address: 1235 MICCOSUKEE RD.
City-St-Zip: TALLAHASSEE, FL 32308 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: WILLIAM R. JONES, III

PRES

04/29/2011

Electronic Signature of Signing Officer or Director

Date