## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#814726**

FILED Jan 03, 2012 Secretary of State

Entity Name: PIONEER AMERICAN INSURANCE COMPANY

Current Principal Place of Business: New Principal Place of Business:

425 AUSTIN AVE WACO, TX 76701 US

Current Mailing Address: New Mailing Address:

P. O. BOX 240 WACO, TX 767030240 US

FEI Number: 75-0914374 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST BOX 6200 TALLAHASSEE, FL 32399 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

## **OFFICERS AND DIRECTORS:**

Title: VT

Name: SCHAFFER, DARLA A Address: 425 AUSTIN AVE. City-St-Zip: WACO, TX 76701

Title: VAS

Name: DUNLAP, JOE W Address: 425 AUSTIN AVE. City-St-Zip: WACO, TX 76701

Title: PD

Name: PEAVY, SHELBY L Address: 425 AUSTIN AVE. City-St-Zip: WACO, TX 76701

Title: \

Name: SLIVA, DARREN G Address: 425 AUSTIN AVE City-St-Zip: WACO, TX 76701

Title: \

Name: BLANTON, MICHAEL J Address: 425 AUSTIN AVENUE City-St-Zip: WACO, TX 76701

Title: \

Name: SAUCEDO, CYNTHIA L Address: 425 AUSTIN AVENUE City-St-Zip: WACO, TX 76701

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: DARLA SCHAFFER VT 01/03/2012