

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 834432

FILED
Feb 18, 2011
Secretary of State

Entity Name: SOUTHLAND NATIONAL INSURANCE CORPORATION

Current Principal Place of Business:

1812 UNIVERSITY BLVD.
TUSCALOOSA, AL 35401

New Principal Place of Business:

Current Mailing Address:

PO BOX 1520
TUSCALOOSA, AL 35403

New Mailing Address:

FEI Number: 63-0572745

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P.O. BOX 6200 32314-6200
200 E. GAINES ST.
TALLAHASSEE, FL 32399 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: VT
Name: DAVIS, VICKIE D
Address: 1812 UNIVERSITY BLVD.
City-St-Zip: TUSCALOOSA, AL 35401

Title: P
Name: WRIGHT, JEFFREY D
Address: 1812 UNIVERSITY BLVD.
City-St-Zip: TUSCALOOSA, AL 35401

Title: VS
Name: BEALL, DIANE
Address: 1812 UNIVERSITY BLVD.
City-St-Zip: TUSCALOOSA, AL 35401

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: ANN SAPALA

CO

02/18/2011

Electronic Signature of Signing Officer or Director

Date