

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000005739

**FILED**  
**May 01, 2011**  
**Secretary of State**

**Entity Name:** SOUTHWEST REINSURE, INC.

**Current Principal Place of Business:**

2400 LOUISIANA BLVD. NE, AFC 4  
ALBUQUERQUE, NM 87110

**New Principal Place of Business:**

**Current Mailing Address:**

2400 LOUISIANA BLVD. NE, AFC 4  
ALBUQUERQUE, NM 87110

**New Mailing Address:**

**FEI Number:** 85-0339432

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NATIONAL CORPORATE RESEARCH, LTD., INC.  
515 EAST PARK AVE  
TALLAHASSEE, FL 32301 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: PD  
Name: SMITH, JAMES B  
Address: 2400 LOUISIANA BLVD. NE, AFC 4  
City-St-Zip: ALBUQUERQUE, NM 87110

Title: DTVP  
Name: GALAVIZ, GABRIEL  
Address: 15920 ADDISON ROAD  
City-St-Zip: ADDISON, TX 75001

Title: S  
Name: WINIGER, VIKI L  
Address: 15920 ADDISON ROAD  
City-St-Zip: ADDISON, TX 75001

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: SARAH A. KENNEDY

POA

05/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date