

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000690

FILED
Jan 17, 2008
Secretary of State

Entity Name: AMERICAN MANAGEMENT CORPORATION INSURANCE SERVICES

Current Principal Place of Business:

824 FRONT STREET
CONWAY, AR 72032

New Principal Place of Business:

Current Mailing Address:

PO BOX 2020
CONWAY, AR 72033

New Mailing Address:

FEI Number: 71-0226800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: STRANGE, STEPHEN L SR
Address: 824 FRONT ST
City-St-Zip: CONWAY, AR 72032

Title: VSD () Delete
Name: ROLAND, FRANK W
Address: 824 FRONT ST
City-St-Zip: CONWAY, AR 72032

Title: VD () Delete
Name: STRANGE, STEPHEN L JR
Address: 20 KENSINGTON
City-St-Zip: CONWAY, AR 72034

Title: VD () Delete
Name: ALDERSON, MIKE
Address: 824 FRONT ST
City-St-Zip: CONWAY, AR 72032

Title: VP () Delete
Name: ALDERSON, MIKE
Address: 824 FRONT ST
City-St-Zip: CONWAY, AR 72032

Title: AS () Delete
Name: HILDEBRAND, JOHN C
Address: 3535 ROCKFORD CIRCLE
City-St-Zip: CONWAY, AR 72034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: ALDERSON, MICHAEL K
Address: 824 FRONT ST
City-St-Zip: CONWAY, AR 72032

Title: VP (X) Change () Addition
Name: STRANGE, DOUGLAS A
Address: 824 FRONT ST
City-St-Zip: CONWAY, AR 72032

Title: T (X) Change () Addition
Name: GRIMES, JOHN D
Address: 824 FRONT ST
City-St-Zip: CONWAY, AR 72032

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FRANK W. ROLAND

VSD

01/17/2008

Electronic Signature of Signing Officer or Director

Date