2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2011
Secretary of State

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Entity Name: STARMOUNT INSURANCE AGENCY, INC.

Current Principal Place of Business:

7800 OFFICE PARK BLVD.
BATON ROUGE, LA 708097603

New Principal Place of Business:

8485 GOODWOOD BLVD.
BATON ROUGE, LA 70806

Current Mailing Address:

PO BOX 98100
BATON ROUGE, LA 708989100

New Mailing Address:

FEI Number: 72-0809131 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANFORD, PAUL P
PAUL P. SANFORD & ASSOCIATES, P.A.
106 S. MONROE STREET
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: C
Name: STERNBERG, HANS J
Address: 8485 GOODWOOD BLVD.
City-St-Zip: BATON ROUGE, LA 70806

Title: SECT
Name: WILD, JEFFREY G
Address: 8485 GOODWOOD BLVD.
City-St-Zip: BATON ROUGE, LA 70806

Title: P
Name: STERNBERG, ERICH
Address: 8485 GOODWOOD BLVD.
City-St-Zip: BATON ROUGE, LA 70806

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: JEFFREY G. WILD CFO 04/06/2011

Electronic Signature of Signing Officer or Director — Date