

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003520

FILED  
Apr 20, 2012  
Secretary of State

Entity Name: OMEGA ADMINISTRATORS, INC.

**Current Principal Place of Business:**

1513 COUNTRY CLUB ROAD  
SHERWOOD, AR 72120

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6208  
NORTH LITTLE ROCK, AR 72124

**New Mailing Address:**

FEI Number: 04-3740469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: PCEO  
Name: CHOATE, ED  
Address: 1513 COUNTRY CLUB  
City-St-Zip: SHERWOOD, AR 72120

Title: VPCF  
Name: ROGERS, PHYLLIS  
Address: 1513 COUNTRY CLUB  
City-St-Zip: SHERWOOD, AR 72120

Title: VPO  
Name: HARBERT, LYNN  
Address: 1513 COUNTRY CLUB  
City-St-Zip: SHERWOOD, AR 72120

Title: VPDD  
Name: HURD, HERMAN  
Address: 1513 COUNTRY CLUB  
City-St-Zip: SHERWOOD, AR 72120

Title: VPIT  
Name: MOORE, ALLEN  
Address: 1513 COUNTRY CLUB  
City-St-Zip: SHERWOOD, AR 72120

Title: D  
Name: OWNBNEY, RONALD  
Address: 407 EAST 4TH STREET  
City-St-Zip: RUSSELLVILLE, AR 72801

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: PHYLLIS ROGERS

VPCF

04/20/2012

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

\_\_\_\_\_ Date