

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005145

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** RANCHERS AND FARMERS INSURANCE COMPANY

**Current Principal Place of Business:**

505 ORLEANS, SUITE 400  
BEAUMONT, TX 77701

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3730  
BEAUMONT, TX 77704

**New Mailing Address:**

**FEI Number:** 20-0505287

**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:** P  
**Name:** SHIPLEY, WESLEY  
**Address:** 3540 HEIGHTS  
**City-St-Zip:** BEAUMONT, TX 77706

**Title:** ST  
**Name:** SHEEHY, JAMES P  
**Address:** 7855 WINDCHASE  
**City-St-Zip:** BEAUMONT, TX 77713

**Title:** V  
**Name:** MAY, JAMES A  
**Address:** 6020 BARRINGTON AVE.  
**City-St-Zip:** BEAUMONT, TX 77706

**Title:** VD  
**Name:** MOOR, GLENN D  
**Address:** 1107 HOMESTEAD AVE.  
**City-St-Zip:** LUBBOCK, TX 79416

**Title:** VD  
**Name:** MOOR, THEORDRIC E III  
**Address:** 4755 MONTICELLO  
**City-St-Zip:** BEAUMONT, TX 77706

**Title:** D  
**Name:** HULSOPPLE, VIVIAN R  
**Address:** 695 20TH STREET  
**City-St-Zip:** BEAUMONT, TX 77706

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:** WESLEY W. SHIPLEY

P

01/05/2011

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

\_\_\_\_\_  
Date