

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002443

FILED
Apr 24, 2008
Secretary of State

Entity Name: BROWN & BROWN OF ARKANSAS, INC.

Current Principal Place of Business:

2120 RIVERFRONT DRIVE, SUITE 200
LITTLE ROCK, AR 72203

New Principal Place of Business:

2120 RIVERFRONT DRIVE, SUITE 200
LITTLE ROCK, AR 72202

Current Mailing Address:

2120 RIVERFRONT DRIVE, SUITE 200
LITTLE ROCK, AR 72203

New Mailing Address:

2120 RIVERFRONT DRIVE, SUITE 200
LITTLE ROCK, AR 72202

FEI Number: 41-2041348

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: D,P () Delete
Name: BRIDGES, C. ROY
Address: 3101 W. MLK, JR. BOULEVARD, SUITE 400
City-St-Zip: TAMPA, FL 33607

Title: V,S () Delete
Name: GRAMMIG, LAUREL L
Address: 3101 W. MLK, JR. BOULEVARD, SUITE 400
City-St-Zip: TAMPA, FL 33607

Title: V,AS () Delete
Name: DONEGAN, THOMAS M
Address: 3101 W. MLK, JR. BOULEVARD, SUITE 400
City-St-Zip: TAMPA, FL 33607

Title: T () Delete
Name: RACE, CHRIS
Address: 3101 W. MLK, JR. BOULEVARD, SUITE 400
City-St-Zip: TAMPA, FL 33607

Title: V () Delete
Name: WALKER, CORY T
Address: 220 SOUTH RIDGEWOOD AVENUE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: V () Delete
Name: WHITE, TIM
Address: 706 WEST MAIN STREET
City-St-Zip: RUSSELLVILLE, AR 72811

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

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

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

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: LAUREL L GRAMMIG

S

04/24/2008

Electronic Signature of Signing Officer or Director

Date