

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005332

FILED
Apr 10, 2012
Secretary of State

Entity Name: JAMES C. JENKINS INSURANCE SERVICE, INC.

Current Principal Place of Business:

2552 STANWELL DRIVE
CONCORD, CA 94520

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5668
CONCORD, CA 94524

New Mailing Address:

PO BOX 130
CEDAR CITY, UT 84721

FEI Number: 94-2448663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HATCH, JOHN D ESQ.
1267 BERKSHIRE LANE, SUITE 200
TARPON SPRINGS, FL 34688 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/D
Name: UTTERBACK, CHRIS
Address: 216 S 200 W
City-St-Zip: CEDAR CITY, UT 84720

Title: VP/D
Name: CONNELL, JOHN F
Address: 2552 STANWELL DRIVE
City-St-Zip: CONCORD, CA 94520

Title: VP/D
Name: KARPENKO, MARK V
Address: 2552 STANWELL DR
City-St-Zip: CONCORD, CA 94520

Title: VP/D
Name: PERATA, CURTIS J
Address: 2552 STANWELL DRP.O. BOX 5668
City-St-Zip: CONCORD, CA 94520

Title: SEC
Name: KENNEY, MARK G
Address: 44 W HARDING AVE
City-St-Zip: CEDAR CITY, UT 84720

Title: D
Name: LEAVITT, ERIC O
Address: 216 S 200 W
City-St-Zip: CEDAR CITY, UT 84721

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: MARK G KENNEY

SEC

04/10/2012

Electronic Signature of Signing Officer or Director

Date