

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002836

FILED
Mar 04, 2011
Secretary of State

Entity Name: ALL HOMES INSURANCE CORP.

Current Principal Place of Business:

380 PARK PLACE BLVD.
SUITE 200
CLEARWATER, FL 33759

New Principal Place of Business:

Current Mailing Address:

380 PARK PLACE BLVD.
SUITE 200
CLEARWATER, FL 33759

New Mailing Address:

FEI Number: 26-0266655

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

OFFICERS AND DIRECTORS:

Title: P
Name: LENTZ, DAVID B
Address: 380 PARK PLACE BLVD., SUITE 200
City-St-Zip: CLEARWATER, FL 33759

Title: VTAS
Name: KOTLER, RANDY L
Address: 380 PARK PLACE BLVD., SUITE 200
City-St-Zip: CLEARWATER, FL 33759

Title: V
Name: SMITH, SHANNON E
Address: 380 PARK PLACE BLVD., SUITE 200
City-St-Zip: CLEARWATER, FL 33759

Title: VS
Name: ALLEN, BENJAMIN S
Address: 380 PARK PLACE BLVD., SUITE 200
City-St-Zip: CLEARWATER, FL 33759

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: BENJAMIN S. ALLEN

VP

03/04/2011

Electronic Signature of Signing Officer or Director

Date