2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2011
Secretary of State

DOCUMENT# F10000002243

Entity Name: RELIANT INSURANCE COMPANY LIMITED

Current Principal Place of Business:

4165 120TH ST
DES MOINES, IA 50323

New Principal Place of Business:

Current Mailing Address:

4165 120TH ST
DES MOINES, IA 50323

New Mailing Address:

FEI Number: 98-0516899 **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: CP
Name: LANE, SR., JOSEPH
Address: 4165 120TH ST
City-St-Zip: DES MOINES, IA 50323

Title: DVPT
Name: CLEARWATER, PAMELA
Address: 4165 120TH ST
City-St-Zip: DES MOINES, IA 50323

Title: DS
Name: DUNCAN, JOEL
Address: 4165 120TH ST
City-St-Zip: DES MOINES, IA 50323

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: PAMELA CLEARWATER DVPT 04/28/2011

Electronic Signature of Signing Officer or Director Date