

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000003612

FILED  
Apr 06, 2011  
Secretary of State

**Entity Name:** SOUTHERN NATIONAL RISK MANAGEMENT CORPORATION

**Current Principal Place of Business:**

333 TEXAS STREET  
SUITE 725  
SHREVEPORT, LA 71101

**New Principal Place of Business:**

**Current Mailing Address:**

6363 N. STATE HWY 161  
SUITE 100  
IRVING, TX 75038

**New Mailing Address:**

7701 LAS COLINAS RIDGE  
SUITE 600  
IRVING, TX 750637555 US

FEI Number: 72-1201977

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FRONTE, JAMES  
801 BRICKELL AVENUE  
SUITE 1450  
MIAMI, FL 33131 US

**Name and Address of New Registered Agent:**

BOCANEGARA, GEORGE A  
801 BRICKELL AVENUE  
SUITE 1450  
MIAMI, FL 33131 US

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: GEORGE A BOCANEGRA

04/06/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S  
Name: RYAN, PATRICIA A  
Address: 7701 LAS COLINAS RIDGE #600  
City-St-Zip: IRVING, TX 750637555 US

Title: P  
Name: TITUS, CLESSIE F  
Address: 7701 LAS COLINAS RIDGE  
City-St-Zip: IRVING, TX 750637555 US

Title: TD  
Name: MACKEY, JERRY  
Address: 7701 LAS COLINAS RIDGE #600  
City-St-Zip: IRVING, TX 750637555 US

Title: D  
Name: HINSON, LAURA  
Address: 7701 LAS COLINAS RIDGE #600  
City-St-Zip: IRVING, TX 750637555 US

Title: D  
Name: RUMPLER, JOHN  
Address: WALL STREET PLAZA, 88 PINE STREET  
City-St-Zip: NEW YORK, NY 100051801 US

Title: AS  
Name: MALONEY, PETER  
Address: WALL STREET PLAZA, 88 PINE STREET  
City-St-Zip: NEW YORK, NY 100051801 US

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: PATRICIA A RYAN

SEC

04/06/2011

Electronic Signature of Signing Officer or Director

Date