

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003897

**FILED**  
**Mar 30, 2011**  
**Secretary of State**

**Entity Name:** THE POLLARD AGENCY, INC.

**Current Principal Place of Business:**

1793 COUNTY RD 224  
STE B  
FRUITHURST, AL 36262

**New Principal Place of Business:**

**Current Mailing Address:**

1793 COUNTY RD 224  
STE B  
FRUITHURST, AL 36262

**New Mailing Address:**

**FEI Number:** 64-0632157      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KELLEY, CHARLES  
1511 HIGHWAY 173  
GRACERVILLE, FL 32440      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: POLLARD, R. BRUCE PRES  
Address: 1797 COUNTY RD. #224  
City-St-Zip: FRUITHURST, AL 36262

Title: V  
Name: POLLARD, BROCK A V-PRES  
Address: 1241 EAGLE PARK RD  
City-St-Zip: BIRMINGHAM, AL 35242

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: R BRUCE POLLARD

PRES

03/30/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date