2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005582

FILED Jan 08, 2009 Secretary of State

Entity Name: CENTERSTONE INSURANCE AND FINANCIAL SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business: 4851 LBJ FREEWAY, SUITE 1100 DALLAS, TX 75244 **Current Mailing Address: New Mailing Address:** 4851 LBJ FREEWAY, SUITE 1100 DALLAS, TX 75244 FEI Number: 95-4018229 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete Title: () Change () Addition DIFIORE, BERNARD Name: Name: 4851 LBJ FREEWAY, SUITE 1100 Address: Address: City-St-Zip: DALLAS, TX 75244 City-St-Zip: EVP Title: Title: () Delete (X) Change () Addition ROBERTSON, FRED ROBERTSON, FRED Name: Name: 4851 LBJ FREEWAY, SUITE 1100 4851 LBJ FREEWAY, SUITE 1100 Address: Address: DALLAS, TX 75244 City-St-Zip: City-St-Zip: DALLAS, TX 75244 Title: AS () Delete Title: () Change () Addition LEWIS, JEFFRY Name: Name: 4851 LBJ FREEWAY, SUITE 1100 Address: Address: City-St-Zip: DALLAS, TX 75244 City-St-Zip: Title: CFO () Delete Title: () Change () Addition KIRKSEY, T. S Name: Name: Address: 4851 LBJ FREEWAY, SUITE 1100 Address: City-St-Zip: DALLAS, TX 75244 City-St-Zip: Title: EVP () Delete Title: () Change () Addition GOMES, MICHAEL Name: Name: 4851 LBJ FREEWAY, SUITE 1100 Address: Address: City-St-Zip: DALLAS, TX 75244 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JEFFRY J. LEWIS AS 01/08/2009