2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H91032

FILED Jan 04, 2011 Secretary of State

Entity Name: DEFRAIN INSURANCE, INC.

Current Principal Place of Business: New Principal Place of Business:

2114 DREW ST #C

CLEARWATER, FL 33765 US

Current Mailing Address: New Mailing Address:

2114 DREW ST #C

CLEARWATER, FL 33765 US

FEI Number: 59-2637671 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:

DEFRAIN, TONYA S 1430 JASMINE WAY

CLEARWATER, FL 33756 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

 Name:
 DEFRAIN, TONYA

 Address:
 1430 JASMINE WAY

 City-St-Zip:
 CLEARWATER, FL 33756

Title:

Name: DEFRAIN, TONYA S Address: 1430 JASMINE WAY City-St-Zip: CLEARWATER, FL 33756 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: TONYA S DEFRAIN PD 01/04/2011