

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004664

FILED
Feb 15, 2010
Secretary of State

Entity Name: INLAND PROTECTION FINANCING CORPORATION

Current Principal Place of Business:

C/O STATE BOARD OF ADMINISTRATION
1801 HERMITAGE BLVD.
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

C/O STATE BOARD OF ADMINISTRATION
1801 HERMITAGE BLVD.
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-3404559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEENCK, THOMAS A
C/O STATE BOARD OF ADMINISTRATION
1801 HERMITAGE BLVD.
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

MCCAULEY, MICHAEL P
C/O STATE BOARD OF ADMINISTRATION
1801 HERMITAGE BLVD.
TALLAHASSEE, FL 32308 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: MICHAEL P. MCCAULEY

02/15/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: MCDANIEL, JERRY
Address: 200 EAST GAINES STREET
City-St-Zip: TALLAHASSEE, FL 32399

Title: CEO
Name: WILLIAMS, ASHBEL C
Address: 1801 HERMITAGE BLVD STE 100
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: HUGHES, AMBER
Address: 200 EAST GAINES STREET
City-St-Zip: TALLAHASSEE, FL 323990354

Title: T
Name: SIGRIST, KEVIN
Address: 1801 HERMITAGE BLVD., SUITE 100
City-St-Zip: TALLAHASSEE, FL 32308

Title: S
Name: MCCAULEY, MICHAEL P
Address: 1801 HERMITAGE BLVD, SUITE 100
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: JOHNSON, ROBERT
Address: 200 EAST GAINES STREET
City-St-Zip: TALLAHASSEE, FL 32399

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL P. MCCAULEY

S

02/15/2010

Electronic Signature of Signing Officer or Director

Date