2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2012
Secretary of State

DOCUMENT# P00000058093

Entity Name: FOUR SEASONS INSURANCE, INC.

Current Principal Place of Business:

200 NORTH OLD CORRY FIELD ROAD
PENSACOLA, FL 32506

New Principal Place of Business:

Current Mailing Address:

200 NORTH OLD CORRY FIELD ROAD
PENSACOLA, FL 32506

New Mailing Address:

FEI Number: 59-3655148 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLALOCK, OUIDA G
200 NORTH OLD CORRY FIELD ROAD
PENSACOLA, FL 32506 US

Name and Address of New Registered Agent:

BLALOCK, OUIDA G
3438 ROBINSON POINT ROAD
BAGDAD, FL 32583 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: OUIDA G BLALOCK 02/09/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: BLALOCK, OUIDA G
Address: 3438 ROBINSON POINT ROAD
City-St-Zip: BAGDAD, FL 32583

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: OUIDA G BLALOCK PRES 02/09/2012
Electronic Signature of Signing Officer or Director Date