2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 23, 2012
Secretary of State

DOCUMENT# P01000030726

Entity Name: COCHRAN INSURANCE, INC.

Current Principal Place of Business:

2015 13TH STREET
ST CLOUD, FL 34769

New Principal Place of Business:

Current Mailing Address:

2015 13TH STREET
ST CLOUD, FL 34769

New Mailing Address:

3824 KYLE DRIVE
SAINT CLOUD, FL 34772

FEI Number: 59-3719734 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COCHRAN, MARILYN B
2015 13TH STREET
ST CLOUD, FL 34769 US

Name and Address of New Registered Agent:

MURPHY, JASON L
3824 KYLE DRIVE
SAINT CLOUD, FL 34772 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: JASON L MURPHY 05/23/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: COO
Name: MURPHY, JASON L
Address: 3824 KYLE DRIVE
City-St-Zip: SAINT CLOUD, FL 34772

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: JASON L MURPHY COO 05/23/2012
Electronic Signature of Signing Officer or Director Date