

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000063050

Entity Name: BIG BEND INSURANCE, INC.

FILED
Aug 02, 2004
Secretary of State

Current Principal Place of Business:

1300 METROPOLITAN
SUITE 110
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

1300 METROPOLITAN
SUITE 110
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 47-0870211

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCAULEY, BYRON
208 WEST RIDGE DRIVE
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: MCAULEY, BYRON R
Address: 208 WEST RIDGE DRIVE
City-St-Zip: TALLAHASSEE, FL 32304

Title: VP () Delete
Name: BENNETT, MIACHAEL
Address: 1009 MORGAN AVE.
City-St-Zip: CHATTAHOOCHEE, FL 32324

Title: S () Delete
Name: LEITE, HELEN V
Address: 3207 MOUND DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HELEN, LEITE V
Address: 3207 MOUND DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: VP (X) Change () Addition
Name: ALEXANDER, SANDRA L
Address: 1301 BARINEAU RD
City-St-Zip: QUINCY, FL 32351

Title: S (X) Change () Addition
Name: ROBIN, ALEXANDER L
Address: 6522 IRON LEIGE DR
City-St-Zip: TALLAHASSEE, FL 32308

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HELEN V LEITE

PRES

08/02/2004

Electronic Signature of Signing Officer or Director

_____ Date