

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000063050

Entity Name: BIG BEND INSURANCE, INC.

FILED
Apr 22, 2011
Secretary of State

Current Principal Place of Business:

1535 KILLEARN CENTER BLVD
STE B-3
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

1535 KILLEARN CENTER BLVD
STE B-3
TALLAHASSEE, FL 32309

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:

LEITE, HELEN V PRES
1535 KILLEARN CENTER BLVD
STE B-3
TALLAHASSEE, FL 32309 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

OFFICERS AND DIRECTORS:

Title: P
Name: LEITE, HELEN V
Address: 3207 MOUND DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: D
Name: MCAULEY, BYRON R
Address: 208 WESTRIDGE DR
City-St-Zip: TALLAHASSEE, FL 32304

Title: D
Name: HICKEY, ELEZABETH
Address: 1016 HAWKEYE TRAIL
City-St-Zip: TALLAHASSEE, FL 32317

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: HELEN V LEITE

PRES

04/22/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date