

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03231

FILED
Mar 30, 2011
Secretary of State

Entity Name: STUART C. IRBY COMPANY

Current Principal Place of Business:

815 S. STATE STREET
JACKSON, MS 39201 US

New Principal Place of Business:

Current Mailing Address:

815 S. STATE STREET (39201)
P.O. BOX 1819
JACKSON, MS 392151819 US

New Mailing Address:

FEI Number: 64-0179020 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: WIGTON, MICHAEL C
Address: 815 S. STATE ST.
City-St-Zip: JACKSON, MS 39201

Title: COO
Name: WARING, ANDREW J
Address: 815 S. STATE ST.
City-St-Zip: JACKSON, MS 39201

Title: V
Name: CAMERON, JAMES F
Address: 815 S. STATE ST.
City-St-Zip: JACKSON, MS 39201

Title: CFO
Name: HONIGFORT, JOHN
Address: 815 S. STATE STREET
City-St-Zip: JACKSON, MS 39201

Title: V
Name: LEECH, MICHAEL
Address: 815 S. STATE STREET
City-St-Zip: JACKSON, MS 39201

Title: V
Name: MOAK, EDWARD A
Address: 815 S. STATE STREET
City-St-Zip: JACKSON, MS 39201

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: JOHN HONIGFORT

CFO

03/30/2011

Electronic Signature of Signing Officer or Director

Date