

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000004916

FILED
Mar 06, 2012
Secretary of State

Entity Name: WOOD FINANCIAL INSURANCE GROUP, INC.

Current Principal Place of Business:

750 W HAMPSHIRE BLVD
STE 2
CITRUS SPRINGS, FL 34434

New Principal Place of Business:

Current Mailing Address:

750 W HAMPSHIRE BLVD
STE 2
CITRUS SPRINGS, FL 34434

New Mailing Address:

FEI Number: 80-0090763 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WOOD, ROBERT E
5219 CHAMPIONSHIP CUP LN
BROOKSVILLE, FL 34609 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: WOOD, ROBERT E
Address: 5219 CHAMPIONSHIP CUP LN
City-St-Zip: BROOKSVILLE, FL 34609

Title: S
Name: WOOD, PATRICIA A
Address: 5219 CHAMPIONSHIP CUP LN
City-St-Zip: BROOKSVILLE, FL 34609

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: ROBERT E WOOD

PRES

03/06/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date