

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04263

FILED
Feb 07, 2011
Secretary of State

Entity Name: SOUTHERN FARM BUREAU CASUALTY INSURANCE COMPANY

Current Principal Place of Business:

1800 EAST COUNTY LINE ROAD
RIDGELAND, MS 39157 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1800
RIDGELAND, MS 391581800 US

New Mailing Address:

FEI Number: 64-0288243

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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: D
Name: ANDERSON, RONALD
Address: 9516 AIRLINE HIGHWAY
City-St-Zip: BATON ROUGE, LA 70815

Title: D
Name: KNIGHT, RANDY
Address: 6310 I-55 NORTH
City-St-Zip: JACKSON, MS 39211

Title: D
Name: RANDY, VEACH
Address: 10720 KANIS ROAD
City-St-Zip: LITTLE ROCK, AR 72211

Title: V
Name: JARRATT, ROBERT
Address: 1800 EAST COUNTY LINE ROAD, SUITE 400
City-St-Zip: RIDGELAND, MS 39157

Title: V
Name: STEVE, INGRAM W
Address: 1800 EAST COUNTY LINE ROAD, SUITE 400
City-St-Zip: RIDGELAND, MS 39157

Title: D
Name: HOBLICK, JOHN
Address: 5700 SOUTHWEST 34TH STREET
City-St-Zip: GAINESVILLE, FL 32608

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: STEVE W. INGRAM

SVP

02/07/2011

Electronic Signature of Signing Officer or Director

Date