

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000075443

FILED
Jan 06, 2012
Secretary of State

Entity Name: STEWART INSURANCE SERVICES, INC.

Current Principal Place of Business:

4540 SOUTHSIDE BLVD
SUITE 902 A
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

4540 SOUTHSIDE BLVD
SUITE 902 A
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 20-2881723

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, BARNEY IV
1129 MILLCREEK DR
JACKSONVILLE, FL 32259 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: STEWART, BARNEY
Address: 1129 MILL CREEK DR
City-St-Zip: JACKSONVILLE, FL 32259

Title: VPST
Name: STEWART, GRACE
Address: 1129 MILL CREEK DR
City-St-Zip: JACKSONVILLE, FL 32259

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: GRACE STEWART

VP

01/06/2012

Electronic Signature of Signing Officer or Director

Date