2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000091905

Entity Name: SOUTHEAST AEROSPACE INSURANCE CORP.

FILED Jan 10, 2012 Secretary of State

Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
14921 CASTLEGATE AVE DAVIE, FL 33331	<u> </u>			
Current Mailing Address	:	New Mailing Address:		
4839 VOLUNTEER RD SUITE 700 SOUTHWEST RANCHES	; FL 33330			
FEI Number: 74-3188920	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:		New Registered Agent:		
LAWSON, RAYMOND B 14921 CASTLEGATE AVE DAVIE, FL 33331 US	:			
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 Age	nt	Date	

OFFICERS AND DIRECTORS:

Title: DPTS

Name: LAWSON, RAYMOND B Address: 14921 CASTLEGATE AVE City-St-Zip: DAVIE, FL 33331

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: RAYMOND B. LAWSON DPTS 01/10/2012