2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000026427

FILED Apr 16, 2009 Secretary of State

Entity Name: PAFFORD INSURANCE, INC. **Current Principal Place of Business: New Principal Place of Business:** 507 EAST IVAN ROAD 839 W ST. AUGUSTINE STREET CRAWFORDVILLE, FL 32327 TALLAHASSEE, FL 32316 **Current Mailing Address: New Mailing Address:** 507 EAST IVAN ROAD CRAWFORDVILLE, FL 32327 FEI Number: 26-2197918 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: LOWE, FRANCES C LOWE, FRANCES C 3119-B CRAWFORDVILLE HIGHWAY 3042 CRAWFORDVILLE HIGHWAY CRAWFORDVILLE, FL 32327 CRAWFORDVILLE, FL 32327 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: 04/16/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition PAFFORD, MICHAEL Name: Name: 507 EAST IVAN ROAD Address: Address: City-St-Zip: CRAWFORDVILLE, FL 32327 City-St-Zip: Title: () Delete Title: () Change () Addition Name: NEWMAN, STACIE D Name: 507 EAST IVAN ROAD Address: Address: CRAWFORDVILLE, FL 32327 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL PAFFORD DP 04/16/2009