

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000110997

Entity Name: RAINS INSURANCE INC

FILED
Jan 11, 2010
Secretary of State

Current Principal Place of Business:

2915 US HWY 1 STE 100
FORT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

2915 US HWY 1 STE 100
FORT PIERCE, FL 34982

New Mailing Address:

FEI Number: 26-3932668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAINS, HYMAN A
2915 US HWY 1 STE 100
FORT PIERCE, FL 34982 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: RAINS, HYMAN
Address: 2915 US HWY 1 STE 100
City-St-Zip: FORT PIERCE, FL 34982

Title: VP
Name: RAINS, NICHOLAS
Address: 2915 US HWY 1 STE 100
City-St-Zip: FORT PIERCE, FL 34982

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: HYMAN RAINS

P

01/11/2010

Electronic Signature of Signing Officer or Director

Date