2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2012
Secretary of State

DOCUMENT# P09000013377

Entity Name: SMYRNA INSURANCE, INC.

Current Principal Place of Business:

411 DUNLAWTON AVE.
PORT ORANGE, FL 32127

New Principal Place of Business:

Current Mailing Address:

411 DUNLAWTON AVE.
PORT ORANGE, FL 32127

New Mailing Address:

PO BOX 1224
NEW SMYRNA BEACH, FL 32170 US

FEI Number: 26-4232913 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, REBECCA M
2401 GLENMORE CT
NEW SMYRNA BEACH, FL 32168 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: WILSON, REBECCA M
Address: 2401 GLENMORE CT
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: REBECCA M WILSON PRES 01/23/2012

Electronic Signature of Signing Officer or Director Date