2011 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 05, 2011
Secretary of State

DOCUMENT# P09000040247

Entity Name: PIONEER INSURANCE INC

Current Principal Place of Business:

1342 COLONIAL BLVD
K223
FORT MYERS, FL 33907

New Principal Place of Business:

5237 SUMMERLIN COMMONS BLVD
232
FORT MYERS, FL 33907

Current Mailing Address:

3201 32ND STREET SW
LEHIGH ACRES, FL 33976

New Mailing Address:

FEI Number: 26-4810609 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLARK, ROBINSON O
3201 32ND STREET SW
LEHIGH ACRES, FL 33976 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: CLARK O ROBINSON

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: O/P
Name: CLARK, ROBINSON O
Address: 3201 32ND STREET SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: T
Name: MARISOL, ROBINSON
Address: 3201 32ND STREET SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: VP
Name: MICHAEL, LYONS
Address: 2237 SUMMERLIN COMMONS BLVD STE. 232
City-St-Zip: FORT MYERS, FL 33907

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: CLARK O ROBINSON O/P 04/05/2011

Electronic Signature of Signing Officer or Director — Date