

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000044731

FILED
Apr 21, 2011
Secretary of State

Entity Name: HEALTH INSURANCE & ANNUITIES, INC.

Current Principal Place of Business:

1258 KINGSWAY RD
BRANDON, FL 33510

New Principal Place of Business:

Current Mailing Address:

1419 TRAIL BOSS LANE
BRANDON, FL 33511

New Mailing Address:

FEI Number: 27-0328445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALLAX, SHARON D
1419 TRAIL BOSS LANE
BRANDON, FL 33511 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, D
Name: HALLAX, MICHAEL P
Address: 1419 TRAIL BOSS LANE
City-St-Zip: BRANDON, FL 33511

Title: S,T
Name: HALLAX, MICHAEL P
Address: 1419 TRAIL BOSS LANE
City-St-Zip: BRANDON, FL 33511

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: MICHAEL HALLAX

PRES

04/21/2011

Electronic Signature of Signing Officer or Director

Date