## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P09000074630

Sec

Apr 08, 2010 Secretary of State

Entity Name: VISTA REINSURANCE INTERMEDIARIES, INC.

Current Principal Place of Business: New Principal Place of Business:

701 MARKET ST, STE 107B ST. AUGUSTINE, FL 32095 US

Current Mailing Address: New Mailing Address:

701 MARKET ST, STE 107B ST. AUGUSTINE, FL 32095 US

FEI Number: 27-0876847 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VOLPE, TIMOTHY W ESQ. 501 RIVERSIDE AVE. 7TH FLOOR JACKSONVILLE, FL 32202 US

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: DPST

Name: CAWLEY, PHILIP C Address: 117 CALLE NORTE

City-St-Zip: ST. AUGUSTINE, FL 32095 US

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: PHILIP C. CAWLEY PRES 04/08/2010