2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2011
Secretary of State

DOCUMENT# P09000088400

Entity Name: FREEMAN INSURANCE AND FINANCIAL SERVICES, INC.

Current Principal Place of Business:

549 N. WYMORE RD., STE 208
MAITLAND, FL 32751

New Principal Place of Business:

549 N. WYMORE RD.
208
MAITLAND, FL 32751

Current Mailing Address:

549 N. WYMORE RD., STE 208
MAITLAND, FL 32751

New Mailing Address:

549 N. WYMORE RD.
208
MAITLAND, FL 32751

FEI Number: 27-1379047 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FREEMAN, PATRINA M
8518 PECONIC DR
ORLANDO, FL 32835 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: FREEMAN, PATRINA M
Address: 549 N. WYMORE RD., STE 208
City-St-Zip: MAITLAND, FL 32751

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: PATRINA M FREEMAN P 03/17/2011

Electronic Signature of Signing Officer or Director Date