

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000031598

FILED
Apr 11, 2012
Secretary of State

Entity Name: GOLDEN YEARS INSURANCE GROUP INC.

Current Principal Place of Business:

6180 BARTRAM VILLAGE DRIVE
JACKSONVILLE, FL 32258

New Principal Place of Business:

Current Mailing Address:

6180 BARTRAM VILLAGE DRIVE
JACKSONVILLE, FL 32258

New Mailing Address:

FEI Number: 27-2409885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRICKLAND, PAMELA M DPS
6180 BARTRAM VILLAGE DR
JACKSONVILLE, FL 32258 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: DPS
Name: STRICKLAND, PAMELA M
Address: 6180 BARTRAM VILLAGE DRIVE
City-St-Zip: JACKSONVILLE, FL 32258

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: PAMELA M STRICKLAND

PRES

04/11/2012

Electronic Signature of Signing Officer or Director

Date