

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000039838

FILED
Apr 06, 2012
Secretary of State

Entity Name: SECURITY LEGAL DEFENSE INSURANCE, INC.

Current Principal Place of Business:

2801 SW COLLEGE ROAD
SUITE 12
OCALA, FL 34474

New Principal Place of Business:

1024 EAST SILVER SPRINGS BLVD.
OCALA, FL 34470

Current Mailing Address:

2801 SW COLLEGE ROAD
SUITE 12
OCALA, FL 34474

New Mailing Address:

1024 EAST SILVER SPRINGS BLVD.
OCALA, FL 34470

FEI Number: 27-2530049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLAPPERT, STANLEY W
2801 SW COLLEGE ROAD
SUITE 12
OCALA, FL 34474 US

Name and Address of New Registered Agent:

PLAPPERT, STANLEY W
1024 EAST SILVER SPRINGS BLVD.
OCALA, FL 34470 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: STANLEY PLAPPERT

04/06/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: PLAPPERT, STANLEY W
Address: 4816 SE 28TH ST
City-St-Zip: Ocala, FL 34480

Title: VP
Name: LEVINE, ADAM S
Address: 1180 GULF BLVD, SUITE 303
City-St-Zip: CLEARWATER, FL 33767

Title: S, T
Name: ANTOINE, STEPHEN J
Address: 6542 SE 87TH ST
City-St-Zip: Ocala, FL 34472

Title: DIR
Name: ANTOINE, ALBERT
Address: 6543 SE 88TH ST
City-St-Zip: Ocala, FL 34472

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: STEPHEN ANTOINE

S, T

04/06/2012

Electronic Signature of Signing Officer or Director

Date