2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2011
Secretary of State

DOCUMENT# P10000081105

Entity Name: SOUTHERN INSURANCE POLICIES INC

Current Principal Place of Business:

809 BEVERLY PARKWAY
PENSACOLA, FL 32505

New Principal Place of Business:

Current Mailing Address:

809 BEVERLY PARKWAY
PENSACOLA, FL 32505

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLORES, RAYMOND G
809 BEVERLY PARKWAY
PENSACOLA, FL 32505 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: PD
Name: ELDER, BRETT
Address: 809 BEVERLY PKWY
City-St-Zip: PENSACOLA, FL 32505

Title: VPD
Name: COSCI, MATTHEW
Address: 809 BEVERLY PKWY
City-St-Zip: PENSACOLA, FL 32505

Title: STD
Name: FLORES, RAYMOND
Address: 809 BEVERLY PKWY
City-St-Zip: PENSACOLA, FL 32505

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: RAYMOND G FLORES STD 05/04/2011

Electronic Signature of Signing Officer or Director — Date