

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000045191

FILED
Jan 12, 2011
Secretary of State

Entity Name: PREMIER INSURANCE CORPORATION, INC.

Current Principal Place of Business:

836 LAFAYETTE ST
CAPE CORAL, FL 339049031 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 100770
CAPE CORAL, FL 33910 US

New Mailing Address:

FEI Number: 65-0676642 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WIER, LAWRENCE M
836 LAFAYETTE STREET
CAPE CORAL, FL 33904 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: PRES
Name: WIER, JACQUELINE D
Address: 857 MONTCLAIRE CT.
City-St-Zip: CAPE CORAL, FL 33904

Title: VP
Name: WIER, LAWRENCE M
Address: 857 MONTCLAIRE CT.
City-St-Zip: CAPE CORAL, FL 33904

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: JACQUELINE WIER

PRES

01/12/2011

Electronic Signature of Signing Officer or Director

Date