2007 FOR PROFIT CORPORATION

FILED Apr 24, 2007 8:00 am Secretary of State

		ANNUAI	, REPO	ORT					Secret	ary	01 2	tate
1. Entity Nar	ne	#P9800006		SOCIATION	,				04-24-200	_		
	ce of Busines	s	Mailing A	ddress		COM WE	EST	guv	, · · ·			
	E, FL 32614	1-7030		ILLE, FL 3261	4-7030) .		 		ini 89118 Til93 II	IN 11100 DIN 1	PIETA II IRBI
2. Principal F	Place of Busin	ness - No P.O. Box #	3. Mailing	Address					A charge			
Suite, Apt	. #, etc.		Suite, A	pt. #, etc.				04042007	Chg-P	CR2E0	34 (12/06)	
City & Sta	te		City & S	tate				4. FEI Numbe 59-1228				oplied For ot Applicable
Zip		Country	Zip		Coun	itry		5. Certificate	of Status Desired		\$8.75 Add Fee Require	
	6, Name	and Address of Current	Registered A	gent		Name		7. Name and	Address of New F	Registered /	Agent	
5700 SW	SCOTTIE 34TH ST ILLE, FL 3					Street Ad	idress (I	P.O. Box Numbe	r is Not Acceptabl	e)		
						City				FL	Zip Cod	e
	e named entity tions of regist	y submits this statement for ered agent.	or the purpose	of changing its	registere	ed office or	register	ed agent, or both	n, in the State of Fl	orida. I am	amiliar with,	and accept
SIGNATURE		or printed name of registered agent	and title it applicab	le. {NOTE.	Registere	d Agent signatur	re required	when reinstating)		ØATE		
		FEE IS \$150.00 7 Fee will be \$550.		Election Campaig		ncing		00 May Be ed to Fees				
10.	PD	OFFICERS AND	DIRECTORS		11.	.		ADDITIONS/0	CHANGES TO OFF	ICERS AND		
NAME STREET ADDRESS CITY-ST-ZIP	LOOP, CA 5700 SW			☐ Delete	1		✓	Lee 1	alta	lme	□ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1	CK AVE. L ST. .ADE. FL 33430		Delete				•			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HOBLICK 250 W RE	, JOHN		☐ Delete	TITLE NAMI STRE	:		· · · · · · · · · · · · · · · · · · ·			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AST BUTLER, 5700 SW	SCOTTIE J	_	☐ Delete	TITLE NAMI STRE	:					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-S1-ZIP				☐ Delete							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<u> </u>	☐ Delete							☐ Change	☐ Addition

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPES ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SOHN L. HOBLICK, PRESIDENT

4/20/07 352/374-1504 Date Daytime Phone •

· ATTACHMENT

SUPPLEMENT

(Florida Farm Bureau General Insurance Company)

NAMES AND STREET ADDRESSES OF EACH 2007 DIRECTORS AND OFFICERS

12.

NAMES OF OFFICERS & DIRECTORS	TITLE	STREET ADDRESS	CITY/STATE
Hoblick, John L.	P/D	5700 SW 34th Street	Gainesville, FL 32608
Courtney, Bill	N/W	5700 SW 34th Street	Gainesville, FL 32608
Roth, Rick	VP/D	PO Box 1300	Belle Glade FL 33430
Byrd, Mark A.	S/D	8286 Stone Road	Apopka, FL 32703
Dooner, Michael	T/D	414 Live Oak Drive	Havana FL 32333-1223
Anderson, Ronald	D	9516 Airline Highway	Baton Rouge, LA
Winkles, David M., Jr.	Q	724 Knox Abbott Drive	Cayce, SC 29033
Patman, Donald	D	7420 Fish Pond Road	Waco, TX 76710
Waide, David	Ö	6311 Ridgewood Road	Jackson, MS 39211
Hillman, David	D	10720 Kanis Road	Little Rock AR 72211-3825