

No. <b>C 175795</b>		<b>Due no later than Nov 30, 2010</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  BEST INSURORS, INC. WILLIAM T ATKINS 3000 BAYPORT DR., STE. 1100 TAMPA FL 33607		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 USA			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	WILLIAM T ATKINS	3000 BAYPORT DR., STE. 1100	TAMPA	FL	USA	33607	
SECRETARY	STUART D BOYD	3000 BAYPORT DR., STE 1100	TAMPA	FL	USA	33607	
5. Organized Under the Laws of:  <b>FL</b> <b>C 175795</b>		6. Annual Report must be signed.*  Signature: Christine John Name (type or print): Christine John  Date: 11/01/2010 Title: Compliance Coordinator					
Processed 11/01/2010		* Electronically provided signatures are accepted as original signatures.					