



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Business Corporation
Annual Report**

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2011

1. Corporate ID No. 000118697

2. Name of Corporation Regions Insurance, Inc.

3. Street Address Principal Business Office:

No. and Street: 1500 RIVERFRONT DRIVE

City or Town: LITTLE ROCK

State: AR

Zip: 72202

Country: USA

4. Business Phone No.

901-684-3275

5. State of Incorporation

State: AR

6. Brief Description of the Character of Business Conducted in Rhode Island

TRANSACTING INSURANCE BUSINESS AS AN AGENT OR BROKER

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JOHN B. OWEN	6000 POPLAR AVE., SUITE 300 MEMPHIS, TN 38119 USA
CFO, EXEC.VICE PRESIDENT AND TREASURER	MARY KAY CALDWELL	6000 POPLAR AVE., SUITE 300 MEMPHIS, TN 38119 USA
SENIOR VICE PRESIDENT, GENERAL COUNSEL AND SECRETARY	W. STEPHEN GARDNER	6000 POPLAR AVE., SUITE 300 MEMPHIS, TN 38119 USA
EXECUTIVE VICE PRESIDENT OF RREGIONS INSURANCE OF ARKANSAS	FRED B. STONE	1500 RIVERFRONT DR. LITTLE ROCK, AR 72202 USA
EXECUTIVE VICE PRESIDENT OF REGIONS INSURANCE OF LOUISIANA	WILLIAM D. QUINLAN	405 E. ST. PETER ST. NEW IBERIA, LA 70560 USA
EXECUTIVE VICE PRESIDENT OF REGIONS INSURANCE OF MISSISSIPPI	CHARLES PORTER	1465 LAKELAND DRIVE JACKSON, MS 39216 USA
EXECUTIVE VICE PRESIDENT OF REGIONS INSURANCE OF INDIANA	JJ IOVINO	1121 HIGHLAND DRIVE KOKOMO, IN 46901 USA
DIRECTOR	JOHN B. OWEN	6000 POPLAR AVE., SUITE 300 MEMPHIS, TN 38119 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.00	2,000.00	100

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 8 Day of March, 2011 at 4:46:07 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By W. STEPHEN GARDNER
Signature of Authorized Representative of the Corporation

SR. VP AND SECRETARY
Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630
Revised 09/07

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