2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 251653

Entity Name: PREMIUM ASSIGNMENT CORPORATION

FILED Apr 09, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3522 THOMASVILLE ROAD

SUITE 400

TALLAHASSEE, FL 32309 US

Current Mailing Address: New Mailing Address:

P.O. BOX 3066

TALLAHASSEE, FL 32315 US

FEI Number: 59-0994720 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FARRIS, KELTON
3522 THOMASVILLE RD
FARRIS, KELTON
3522 THOMASVILLE RD

SUITE 400 SUITE 400

TALLAHASSEE, FL 32308 US TALLAHASSEE, FL 32309 US

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: 04/09/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: VP (X) Change () Addition Name: LEE, KIMBERLY M. Name: LEE, KIMBERLY M.

Address: 3522 THOMASVILLE ROAD Address: 3522 THOMASVILLE ROAD
City-St-Zip: TALLAHASSEE, FL City-St-Zip: TALLAHASSEE, FL 32309 US

Title: VP () Delete Title: PRES (X) Change () Addition

 Name:
 WALKER, LOWELL
 Name:
 KUGELMANN, PETER

 Address:
 3522 THOMASVILLE RD
 Address:
 3522 THOMASVILLE ROAD

 City-St-Zip:
 TALLAHASSEE, FL
 City-St-Zip:
 TALLAHASSEE, FL
 32309 US

Title: VP () Delete Title: VP (X) Change () Addition

Name: THOMAS, JOHN Name: THOMAS, JOHN

Address: 3522 THOMASVILLE ROAD Address: 3522 THOMASVILLE ROAD City-St-Zip: TALLAHASSEE, FL 32309 US

Title: VP () Delete Title: VP (X) Change () Addition

Name:MELENEY, SARAHName:MELENEY, SARAHAddress:3522 THOMASVILLE ROADAddress:3522 THOMASVILLE ROADCity-St-Zip:TALLAHASSEE, FLCity-St-Zip:TALLAHASSEE, FL 32309 US

Title: EVP () Delete Title: () Change () Addition

 Name:
 ABBOTT, GAY O'NEAL
 Name:

 Address:
 303 PEACHTREE ST.
 Address:

 City-St-Zip:
 ATLANTA, GA 30308
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 KLING, JOEL
 Name:

 Address:
 1721 SHADOWMOSS CIR.
 Address:

 City-St-Zip:
 LAKE MARY, FL 32746
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: KIMBERLY LEE VP 04/09/2008