

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004125

FILED
Jan 19, 2009
Secretary of State

Entity Name: GUARANTY INSURANCE SERVICES, INC.

Current Principal Place of Business:

1300 S MOPAC EXPRESSWAY
AUSTIN, TX 78746

New Principal Place of Business:

Current Mailing Address:

PO BOX 2083
AUSTIN, TX 78768

New Mailing Address:

PO BOX 2083
AUSTIN, TX 787682083

FEI Number: 74-2339111

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: SHULTS, HAROLD L JR.
Address: 1300 S MOPAC EXPRESSWAY
City-St-Zip: AUSTIN, TX 78746

Title: D () Delete
Name: BREAUX, VON E
Address: 1300 S MOPAC EXPRESSWAY
City-St-Zip: AUSTIN, TX 78746

Title: T () Delete
Name: BREAUX, VEN E
Address: 1300 SOUTH MOPAC EXPWY
City-St-Zip: AUSTIN, TX 78746

Title: EVP () Delete
Name: BREAUX, VON E
Address: 1300 S MOPAC EXPRESSWAY
City-St-Zip: AUSTIN, TX 78746

Title: S (X) Delete
Name: ALMY, SCOTT
Address: 1300 S MOPAC EXPRESSWAY
City-St-Zip: AUSTIN, TX 78746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: CRAWFORD, BROOK B
Address: 2301 WEST PLANO PKWY, STE 108
City-St-Zip: DALLAS, TX 75075

Title: D (X) Change () Addition
Name: TURNER, JIM
Address: 5959 SHERRY LANE, STE 370
City-St-Zip: DALLAS, TX 75225

Title: VP (X) Change () Addition
Name: GRUNDEI, BRUCE
Address: 2301 WEST PLANO PKWY, STE 108
City-St-Zip: DALLAS, TX 75075

Title: EVP (X) Change () Addition
Name: BROWN, GAYLON
Address: 2301 WEST PLANO PKWY, STE 108
City-St-Zip: DALLAS, TX 75075

Title: () Change () Addition
Name:
Address:
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: BROOK BEAL CRAWFORD

PRES

01/19/2009

Electronic Signature of Signing Officer or Director

Date