

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J86345

FILED  
Jan 03, 2008  
Secretary of State

Entity Name: ROCHE SURETY, INC.

**Current Principal Place of Business:**

ROCHE SURETY, INC.  
TAMPA, FL 33619 US

**New Principal Place of Business:**

**Current Mailing Address:**

1910 ORIENT ROAD  
TAMPA, FL 33619 US

**New Mailing Address:**

FEI Number: 59-2835007      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

DILIBERTO, EDWARD R  
1910 ORIENT RD.  
TAMPA, FL 33619 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: CEO ( ) Delete  
Name: ROCHE, ARMANDO  
Address: 12130 FORT KING HWY  
City-St-Zip: THONOTOSASSA, FL

Title: S ( ) Delete  
Name: ROCHE, LINDA  
Address: 12130 FORT KING HWY  
City-St-Zip: THONOTOSASSA, FL 33592

Title: D ( ) Delete  
Name: RODRIGUEZ, GILBERT M  
Address: 1910 OREINT ROAD  
City-St-Zip: TAMPA, FL 33619

Title: PD ( ) Delete  
Name: ROCHE, SHANNON  
Address: 1910 ORIENT RD.  
City-St-Zip: TAMPA, FL 33619

Title: T ( ) Delete  
Name: MARTIN, MELISA M  
Address: 1910 ORIENT RD.  
City-St-Zip: TAMPA, FL 33619

Title: D ( ) Delete  
Name: POLLOCK SR., GEORGE A  
Address: 1910 ORIENT RD.  
City-St-Zip: TAMPA, FL 33619

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MELISA MARTIN

T

01/03/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date