

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001670

FILED
Apr 23, 2008
Secretary of State

Entity Name: GROUP UNDERWRITERS ASSOCIATION OF AMERICA, INC.

Current Principal Place of Business:

818 NORTH A1A
SUITE 104
PONTE VEDRA BEACH, FL 32082 US

New Principal Place of Business:

Current Mailing Address:

818 NORTH A1A
SUITE 104
PONTE VEDRA BEACH, FL 32082 US

New Mailing Address:

FEI Number: 59-3178990 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISHER, TOUSEY, LEAS & BALL, P.A.
818 NORTH A1A
SUITE 104
PONTE VEDRA BEACH, FL 32082 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LACY, PHIL
Address: P.O. BOX 581933
City-St-Zip: MINNEAPOLIS, MN 55458 US

Title: VPD () Delete
Name: POLLARD, CAROLYN
Address: P.O. BOX 581933
City-St-Zip: MINNEAPOLIS, MN 55458

Title: SD (X) Delete
Name: WOOD, ANN M
Address: P.O. BOX 581933
City-St-Zip: MINNEAPOLIS, MN 55458

Title: TD () Delete
Name: ZEPEDA, CURTIS
Address: P.O. BOX 581933
City-St-Zip: MINNEAPOLIS, MN 55458

Title: D () Delete
Name: HIERS, JIM
Address: P.O. BOX 581933
City-St-Zip: MINNEAPOLIS, MN 55458

Title: D () Delete
Name: WILMOT, JIM
Address: P.O. BOX 581933
City-St-Zip: MINNEAPOLIS, MN 55458

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CURTIS ZEPEDA

TD

04/23/2008

Electronic Signature of Signing Officer or Director

Date