

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N93000001670

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: 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

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: POLLARD, CAROLYN
Address: P.O. BOX 118
City-St-Zip: WEATOGUE, CT 06089 US

Title: VPD (X) Change () Addition
Name: ZEPEDA, CURT
Address: P.O. BOX 118
City-St-Zip: WEATOGUE, CT 06089

Title: TD (X) Change () Addition
Name: DAVISON, ANDREW
Address: P.O. BOX 118
City-St-Zip: WEATOGUE, CT 06089

Title: SD (X) Change () Addition
Name: CORCILLO, ELIZABETH
Address: P.O. BOX 118
City-St-Zip: WEATOGUE, CT 06089

Title: D (X) Change () Addition
Name: WILMOT, JAMES
Address: P.O. BOX 118
City-St-Zip: WEATOGUE, CT 06089

Title: D () Change (X) Addition
Name: KYLE, JENNIFER
Address: P.O. BOX 118
City-St-Zip: WEATOGUE, CT 06089

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: ANDREW DAVISON

TD

05/01/2009

Electronic Signature of Signing Officer or Director

Date