

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000053936

FILED
Apr 16, 2008
Secretary of State

Entity Name: STATEWIDE PREMIUM FINANCE, INC.

Current Principal Place of Business:

2393 S CONGRESS AVE
WEST PALM BEACH, FL 33406

New Principal Place of Business:

2825 N UNIVERSITY DRIVE
SUITE 300
CORAL SPRINGS, FL 33065

Current Mailing Address:

PO BOX 5417
LAKE WORTH, FL 334665417 US

New Mailing Address:

2825 N UNIVERSITY DRIVE
SUITE 300
CORAL SPRINGS, FL 33065

FEI Number: 65-0516148

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINKELSTEIN, MYRON H
2393 S CONGRESS AVE
WEST PALM BEACH, FL 33406 US

Name and Address of New Registered Agent:

FINKELSTEIN, MYRON H
2825 N UNIVERSITY DRIVE
SUITE 300
CORAL SPRINGS, FL 33065 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: _____

04/16/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FINKELSTEIN, MYRON H
Address: 10391 STONEBRIDGE BLVD.
City-St-Zip: BOCA RATON, FL 33498

Title: D () Delete
Name: MANNING, DANA
Address: 1524 HIDDEN LANE
City-St-Zip: ANCHORAGE, AK 99501

Title: CD () Delete
Name: SEAMAN, CARL
Address: 250 PARK AVENUE, SUITE 2030
City-St-Zip: NEW YORK, NY 10017

Title: V () Delete
Name: RAYMOND, DAVID B
Address: 2393 S. CONGRESS AVENUE
City-St-Zip: WEST PALM BEACH, FL 33406

Title: CFO () Delete
Name: SHAW, KAREN
Address: 2393 S. CONGRESS AVENUE
City-St-Zip: WEST PALM BEACH, FL 33406

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FINKELSTEIN, MYRON H
Address: 2825 N UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D (X) Change () Addition
Name: MANNING, DANA
Address: 2825 N UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: CD (X) Change () Addition
Name: SEAMAN, CARL
Address: 2825 N UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 333065

Title: VSD (X) Change () Addition
Name: RAYMOND, DAVID
Address: 2825 N UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: CFOT (X) Change () Addition
Name: SHAW, KAREN
Address: 2825 N UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Change (X) Addition
Name: MEVORAH, STEVEN
Address: 2825 N UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

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: KAREN F SHAW

CFO

04/16/2008

Electronic Signature of Signing Officer or Director

Date