## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000030776

Entity Name: THE NAVIGATOR GROUP, INC.

FILED Jun 16, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
600 GILLA WILMINGT	M RD ΓΟΝ, ΟΗ 4517	7 US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	M RD GAL DEPARTI FON, OH 4517				
FEI Number:	: 31-1642853	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
1200 SOU PLANTATI	ORATION SYS TH PINE ISLAN ON, FL 33324	ND ROAD US			
	named entity s of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUF	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
		B(2)(b), F.S., the corporation did no	ot receive the prior notice.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEO () CRANDALL, ST 600 GILLAM RE WILMINGTON,	).	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	DELUCA, DONA 600 GILLAM RE	).	Title: Name: Address:	( ) Change ( ) Addition	
City-St-Zip:	WILMINGTON,	OH 45177 US	City-St-Zip:		
City-St-Zip: Title: Name: Address: City-St-Zip:	·	Delete EVE ).	City-St-Zip: Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	P () CRANDELL, ST 600 GILLAM RE WILMINGTON,	Delete EVE ). OH 45177 US Delete EY C	Title: Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition	

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: CYNTHIA A HENRY ASSI 06/16/2009