

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F04000004281

FILED  
Oct 31, 2008  
Secretary of State

Entity Name: FINANCIAL CASUALTY & SURETY, INC.

## Current Principal Place of Business:

3131 EASTSIDE-STE. 600  
HOUSTON, TX 77098

## New Principal Place of Business:

3131 EASTSIDE STREET  
600  
HOUSTON, TX 77098

## Current Mailing Address:

P.O. BOX 4479  
HOUSTON, TX 772104479

## New Mailing Address:

FEI Number: 75-2304982      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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: ROBERT SABO

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GARNER, JOHN L  
Address: 3131 EASTSIDE-STE. 600  
City-St-Zip: HOUSTON, TX 77098

Title: COBD ( ) Delete  
Name: STEVES, MYRON F JR  
Address: 3131 EASTSIDE-STE. 600  
City-St-Zip: HOUSTON, TX 77098

Title: SVPD ( ) Delete  
Name: SABO, ROBERT J  
Address: 3131 EASTSIDE-STE. 600  
City-St-Zip: HOUSTON, TX 77098

Title: CFOT ( ) Delete  
Name: HOOKER, JAMES W  
Address: 3131 EASTSIDE-STE. 600  
City-St-Zip: HOUSTON, TX 77098

Title: VPD ( ) Delete  
Name: CABAUD, PHILIP G III  
Address: 3131 EASTSIDE-STE. 600  
City-St-Zip: HOUSTON, TX 77098

Title: D ( ) Delete  
Name: STEVES SKINNER, TERESA  
Address: 3131 EASTSIDE-STE. 600  
City-St-Zip: HOUSTON, TX 77098

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: STEVES, MYRON F JR  
Address: 3131 EASTSIDE-STE. 600  
City-St-Zip: HOUSTON, TX 77098

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: ROBERT SABO

Electronic Signature of Signing Officer or Director

SVPD

10/31/2008

Date