2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P24431

Entity Name: NATIONAL MARINE UNDERWRITERS, INC.

FILED May 01, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
201DEFENSE HIGHWAY SUITE 205 ANNAPOLIS, MD 21403				201DEFENSE HIGHWAY SUITE 205 ANNAPOLIS, MD 21401			
Current Mailing Address:				New Mailing Address:			
201 DEFENSE HIGHWAY SUITE 207 ANNAPOLIS, MD 21403				201DEFENSE HIGHWAY SUITE 205 ANNAPOLIS, MD 21401			
FEI Number:	52-1337983	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()	
Name and	Address of Co	urrent Registered Agent:		Name and	Address of	New Registered Agent:	
	D & MCDONA FIRST STREE 33135 US						
The above in the State		ubmits this statement for the pur	rpose o	f changing it	s registered	office or registered agent, or both,	
SIGNATUR	RE:						
Electronic Signature of Registered Agent					Date		
		(2)(b), F.S., the corporation did not r	eceive t	he prior notice) .		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	BEACHLEY, JOH	IIGHWAY, SUITE 205		Title: Name: Address: City-St-Zip:	BEACHLEY, J	E HIGHWAY, SUITE 205	
Title: Name: Address: City-St-Zip:	VP () RICH, BRADFOR ONE BEACON L CANTON, MA 02	ANE		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	S () SMITH, DENNIS 23 FIRECUT LAI SUDBURY, MA	√E		Title: Name: Address: City-St-Zip:	S (X SMITH, DENN ONE BEACON CANTON, MA	I LANE	
Title: Name: Address: City-St-Zip:	T () MILLS, TODD ONE BEACON L CANTON, MA 02			Title: Name: Address: City-St-Zip:	T (X MILLS, TODD ONE BEACON CANTON, MA	I LANE	
Title: Name: Address: City-St-Zip:	VP () GOODCHILD, PA 124 KUETHE DR ANNAPOLIS, ME	IVE		Title: Name: Address: City-St-Zip:	GOODCHILD,	E HIGHWAY, SUITE 205	
Title: Name: Address: City-St-Zip:	D () DEMBO, DAVID 2002 WINDWAR FT. PIERCE, FL			Title: Name: Address: City-St-Zip:	() 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: DENNIS R. SMITH S 05/01/2009