

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 272924

FILED
Mar 25, 2009
Secretary of State

Entity Name: GULFPORT GUARANTY & FIDELITY CORPORATION

Current Principal Place of Business:

PO BOX 012949
MIAMI, FL 331012494 US

New Principal Place of Business:

100 S BISCAYNE BLVD STE 900
MIAMI, FL 33131 US

Current Mailing Address:

PO BOX 012949
MIAMI, FL 33101 US

New Mailing Address:

100 S BISCAYNE BLVD STE 900
MIAMI, FL 33131 US

FEI Number: 59-1100427

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROGAN, KATHLEEN
100 S. BISCAYNE BLVD
STE 1100
MIAMI, FL 33131 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SVD () Delete
Name: CROGAN, KATHLEEN
Address: 100 S. BISCAYNE BLVD., # 1100
City-St-Zip: MIAMI, FL 33131

Title: PD () Delete
Name: HOLLO, TIBOR
Address: 100 S. BISCAYNE BLVD., # 1100
City-St-Zip: MIAMI, FL 33131

Title: VP () Delete
Name: HOLLO, WAYNE R
Address: 100 S. BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WAYNE HOLLO

VP

03/25/2009

Electronic Signature of Signing Officer or Director

_____ Date