2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 345897

Apr 27, 2010 Secretary of State

Entity Name: CAPITAL ASSURANCE SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business:

7901 4TH STREET NORTH

SUITE 203

ST. PETERSBURG, FL 33702 US

New Mailing Address: Current Mailing Address:

7901 4TH STREET NORTH

SUITE 203 ST. PETERSBURG, FL 33702 US

FEI Number: 59-0582259 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BALKIN, THOMAS J BALKIN, THOMAS J S 7901 4TH STREET NORTH 7901 4TH STREET NORTH SUITE 203 SUITE 203

ST. PETERSBURG, FL 33702 US ST. PETERSBURG, FL 33702 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: THOMAS J BALKAN 04/27/2010

> Date Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Name: WALL, KARL J P/D

7901 4TH STREET NORTH, STE 203 Address: City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: VP/D

Name: STOLZ, DONNA VP/D

7901 4TH STREET NORTH, STE 203 Address: ST. PETERSBURG, FL 33702 US City-St-Zip:

Title:

CARLSON, ROBERT T/D Name:

200 METRO CENTER BLVD., UNIT #8 Address:

City-St-Zip: WARWICK, RI 02886

Title: VP/D

GIANNETTA, ANDREA VP/D Name:

Address: 200 METRO CENTER BLVD., UNIT #8

City-St-Zip: WARWICK, RI 02886

Title:

Name: GRAJEWSKI, JAMES VP/D 7901 4TH STREET NORTH, STE 203 Address: City-St-Zip: ST. PETERSBURG, FL 33702 US

Title:

Name: BALKAN, THOMAS J S

7901 4TH STREET NORTH, STE 203 Address: City-St-Zip: ST. PETERSBURG, FL 33702 US

I hereby 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 all other like empowered.

SIGNATURE: ROBERT CARLSON Т 04/27/2010