

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 461342

FILED
Apr 09, 2004
Secretary of State

Entity Name: SURETY CORPORATION OF FLORIDA

Current Principal Place of Business:

5649 NW 84TH TERR.
TAMARAC, FL 33351

New Principal Place of Business:

6654 NW 100TH STREET
OCALA, FL 344821214

Current Mailing Address:

P.O. BOX 451269
SUNRISE, FL 33345

New Mailing Address:

6654 NW 100TH STREET
OCALA, FL 344821214

FEI Number: 59-1551179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DWYER DENIS A.
10951 S.W. 25TH STREET
DAVIE, FL 33324

Name and Address of New Registered Agent:

DWYER DENIS A.
6654 NW 100TH STREET
OCALA, FL 344821214

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: DENIS A DWYER

04/09/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DWYER, DENIS A.,
Address: 10951 SW 25TH ST
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: D () Delete
Name: DWYER, GLORIA,
Address: 10951 SW 25 ST
City-St-Zip: DAVIE, FL

Title: VD () Delete
Name: DWYER, LAWRENCE T
Address: 9675 NW 28TH ST.
City-St-Zip: CORAL SPRINGS, FL 33065

Title: SD () Delete
Name: POPICK, DEINSE D
Address: 13485 NWW 6TH DR.
City-St-Zip: PLANTATION, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DWYER, DENIS A.,
Address: 6654 NW 100TH STREET
City-St-Zip: OCALA, FL 344821214

Title: D (X) Change () Addition
Name: DWYER, GLORIA,
Address: 6654 NW 100TH STREET
City-St-Zip: OCALA, FL 344821214

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 for the exemption stated in Section 119.07(3)(i), 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: DENIS A DWYER

PD

04/09/2004

Electronic Signature of Signing Officer or Director

Date