

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005119

FILED
Jan 12, 2010
Secretary of State

Entity Name: DEVELOPERS SURETY AND INDEMNITY COMPANY

Current Principal Place of Business:

17780 FITCH STE 200
IRVINE, CA 92614

New Principal Place of Business:

Current Mailing Address:

17780 FITCH STE 200
IRVINE, CA 92614

New Mailing Address:

FEI Number: 42-0429710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
POBOX 6200 (32314-6200)
200 E. GAINES ST.
TALLAHASSEE, FL 32399 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: CS
Name: CROWELL, HARRY C
Address: 17780 FITCH STE 200
City-St-Zip: IRVINE, CA 92614

Title: VTD
Name: ZAZA, SAM
Address: 17780 FITCH STE 200
City-St-Zip: IRVINE, CA 92614

Title: PD
Name: CROWELL, WALTER A
Address: 17780 FITCH STE 200
City-St-Zip: IRVINE, CA 92614

Title: VD
Name: RHODES, DAVID H
Address: 17780 FITCH STE 200
City-St-Zip: IRVINE, CA 92614

Title: VD
Name: KERRIGAN, DAVID L
Address: 17780 FITCH STE 200
City-St-Zip: IRVINE, CA 92614

Title: VD
Name: PATE, STEPHEN T
Address: 17780 FITCH STE 200
City-St-Zip: IRVINE, CA 92614

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: SAM ZAZA

VTD

01/12/2010

Electronic Signature of Signing Officer or Director

Date