2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003696

Entity Name: FIRST CAPITAL SURETY & TRUST COMPANY

FILED Apr 05, 2011 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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230 W. WELLS ST, STE. 402 MILWAUKEE, WI 53203

Current Mailing Address: New Mailing Address:

230 W. WELLS ST, STE. 402 MILWAUKEE, WI 53203

FEI Number: 41-1927038 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ROBINS, CORY S ESQ. SHERIDAN HILLS PROFESSIONAL PLAZA 4030 C SHERIDAN STREET HOLLYWOOD, FL 33021 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

 Name:
 KADISH, STEPHEN L

 Address:
 1360 E. 9TH ST, STE. 400

 City-St-Zip:
 CLEVELAND, OH 44114

Title: [

 Name:
 MAGUIRE, FRANK P

 Address:
 3060 E. NEWPORT COURT

 City-St-Zip:
 MILWAUKEE, WI 53211

Title: P, D

 Name:
 MAGUIRE, DIANE R

 Address:
 230 W. WELLS ST., STE. 402

 City-St-Zip:
 MILWAUKEE, WI 53203

Title: [

 Name:
 DAVIS, RICHARD L

 Address:
 136 COUNTY RD 8317

 City-St-Zip:
 FRAZIER, CO 80442

Title:

Name: DUMAS, JERRY C Address: 113 TIMBERLINE ROAD City-St-Zip: SPEARFISH, SD 57783

Title: VP

 Name:
 ARMSTRONG, DAVE A

 Address:
 230 W WELLS ST, STE 402

 City-St-Zip:
 MILWAUKEE, WI 53203

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: DIANE MAGUIRE PRES 04/05/2011