

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001716

Entity Name: US CATASTROPHE, INC

FILED
Feb 22, 2007
Secretary of State

Current Principal Place of Business:

15168 DECEMBER TRAIL
ROSEMOUNT, MN 55068

New Principal Place of Business:

Current Mailing Address:

8200 1ST AVENUE S.
BLOOMINGTON, MN 55420

New Mailing Address:

15168 DECEMBER TRAIL
ROSEMOUNT, MN 55068

FEI Number: 20-0287866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, STUART J ESQ
601 BAYSHORE BLVD., STE. 720
TAMPA, FL 33606 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: CP () Delete
Name: ADAMS, THOMAS M
Address: 8200 1ST AVENUE S
City-St-Zip: BLOOMINGTON, MN 55420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: ADAMS, THOMAS M
Address: 21741 HUMMINGBIRD ST NW
City-St-Zip: CEDAR, MN 55011 42

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS ADAMS

CP

02/22/2007

Electronic Signature of Signing Officer or Director

Date