## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F74232

FILED Mar 17, 2009 Secretary of State

Entity Name: NOTARY PUBLIC UNDERWRITERS, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	LACHEE PKY SSEE, FL 32311	US		
Current M	lailing Address:		New Mailing Address	s:
P. O. BOX FALLAHA	5378 SSEE, FL 32314	US		
El Number	: 59-2174261 I	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of Cur	rent Registered Agent:	Name and Address o	of New Registered Agent:
	IORST, JACK LACHEE PKWY			
rallaha:	SSEE, FL 32311	US		
Γhe above	,		purpose of changing its registere	d office or registered agent, or both,
Γhe above	named entity sub of Florida.		purpose of changing its registere	d office or registered agent, or both,
Γhe above n the State	named entity sub e of Florida. RE:			d office or registered agent, or both,  Date
The above n the State SIGNATUI	named entity sub e of Florida. RE: Electronic	mits this statement for the		
The above n the State BIGNATUI	named entity sub e of Florida. RE: Electronic	omits this statement for the particular of Registered Agust Fund Contribution ( ).	ent	
The above n the State BIGNATUI	named entity sub e of Florida. RE: Electronic in	omits this statement for the position of Registered Agust Fund Contribution ( ).  RS:  lete  ACK NE	ent	Date
The above not the State SIGNATUING Care Care Care Care Care Care Care Care	e named entity sub e of Florida.  RE: Electronic : mpaign Financing Tr S AND DIRECTO  CSTD () De DIESTELHORST, J 2701 EVERETT LA	Signature of Registered Agust Fund Contribution ( ).  RS:  lete ACK NE Lete ACK NE Lete ACK NE Lete ACK NE	ent  ADDITIONS/CHANGI  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify 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: HELEN SMITH ACCT 03/17/2009