


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 8:00 am
Secretary of State

01-22-2007 90099 013 ***150.00

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1. Entity Name
COLONIAL SURETY COMPANY



Principal Place of Business
**50 CHESTNUT RIDGE ROAD
 MONTVALE, NJ 07645**

Mailing Address
**50 CHESTNUT RIDGE ROAD
 MONTVALE, NJ 07645**

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country

40009011



01092007 Chg-P CR2E034 (12/06)

4. FEI Number
23-0485115

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**CHIEF FINANCIAL OFFICER
 P O BOX 6200 (32314-6200)
 200 E. GAINES ST
 TALLAHASSEE, FL 32399-0000**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D NAME BATTY, MICHAEL A STREET ADDRESS 18 CREST HILL DRIVE, APT 19C CITY-ST-ZIP NYACK, NY 10960	<input type="checkbox"/> Delete	TITLE D NAME Dittrich JR, Raymond R STREET ADDRESS 1209 Champion Way CITY-ST-ZIP Sawlake, TX 76092	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME DITTRICH JR, RAYMOND R STREET ADDRESS 1209 CHAMPIONS WAY CITY-ST-ZIP VEGA, TX 79092	<input type="checkbox"/> Delete	TITLE D NAME BOSNAK, Dominique STREET ADDRESS 25 Ramapo Rd CITY-ST-ZIP Hewitt, NJ 07421	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME PEITLER, MICHAEL A STREET ADDRESS 31 FEATHER SOUND DRIVE CITY-ST-ZIP HENDERSON, NV 89052	<input type="checkbox"/> Delete	TITLE D NAME Gallo, Frederick S. STREET ADDRESS Pine Lane CITY-ST-ZIP Bayville NY 11709	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE PD NAME NUNZIATA, WAYNE T STREET ADDRESS 12 OLD ORCHARD DRIVE CITY-ST-ZIP WESTON, CT 06883	<input type="checkbox"/> Delete	TITLE D NAME Cimasko, Anthony J. STREET ADDRESS 111D Hawthorne Ave CITY-ST-ZIP Park Ridge, NJ 07657	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE D NAME NUNZIATA, JANET STREET ADDRESS 12 OLD ORCHARD DRIVE CITY-ST-ZIP WESTON, CT 06883	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME BOSNAK, DOMINIQUE STREET ADDRESS 44 RAMAPO RD CITY-ST-ZIP HEWITT, NJ 07421	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **201-573-8788**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #