

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004540

FILED
Apr 27, 2009
Secretary of State

Entity Name: COLONIAL SURETY COMPANY

Current Principal Place of Business:

50 CHESTNUT RIDGE ROAD
SUITE 108
MONTVALE, NJ 07645

New Principal Place of Business:

Current Mailing Address:

50 CHESTNUT RIDGE ROAD
SUITE 108
MONTVALE, NJ 07645

New Mailing Address:

FEI Number: 23-0485115 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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: D () Delete
Name: BATTY, MICHAEL A
Address: 18 CREST HILL DRIVE, APT 19C
City-St-Zip: NYACK, NY 10960

Title: D () Delete
Name: DITTRICH JR, RAYMOND R
Address: 1209 CHAMPIONS WAY
City-St-Zip: SOUTHLAKE, TX 76092

Title: D () Delete
Name: PEITLER, MICHAEL A
Address: 31 FEATHER SOUND DRIVE
City-St-Zip: HENDERSON, NV 89052

Title: PD () Delete
Name: NUNZIATA, WAYNE T
Address: 12 OLD ORCHARD DRIVE
City-St-Zip: WESTON, CT 06883

Title: D () Delete
Name: NUNZIATA, JANET
Address: 12 OLD ORCHARD DRIVE
City-St-Zip: WESTON, CT 06883

Title: D () Delete
Name: BOSNAK, DOMINIQUE
Address: 25 RAMPO RD
City-St-Zip: HEWITT, NJ 07421

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WAYNE NUNZIATA

PD

04/27/2009

Electronic Signature of Signing Officer or Director

_____ Date