

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006114

FILED
Apr 09, 2009
Secretary of State

Entity Name: DAILY UNDERWRITERS OF AMERICA COMPANY

Current Principal Place of Business:

1072 HARRISBURG PIKE
CARLISLE, PA 17013

New Principal Place of Business:

Current Mailing Address:

1072 HARRISBURG PIKE
CARLISLE, PA 17013

New Mailing Address:

FEI Number: 23-2051681

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: CDP () Delete
Name: LONG, ROBERT F
Address: 300 BELVEDERE ST.
City-St-Zip: CARLISLE, PA 17013

Title: D () Delete
Name: CUMMINGS, KENNETH F
Address: 38 CREEKVIEW DR.
City-St-Zip: CARLISLE, PA 17013

Title: VD () Delete
Name: WERTZ, ROBERT H
Address: 900 COCKLIN ST.
City-St-Zip: MECHANICSBURG, PA 17055

Title: STD () Delete
Name: SMITH, HARRY C
Address: 207 W. YELLOW BREECHES RD.
City-St-Zip: CARLISLE, PA 17013

Title: D () Delete
Name: GOOD, SAMUEL J JR.
Address: 815 FAIRVIEW RD.
City-St-Zip: CARLISLE, PA 17013

Title: VD () Delete
Name: KEPNER, DWAYNE A
Address: 51 MT. ZION RD.
City-St-Zip: CARLISLE, PA 17013

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: HARRY C SMITH

STD

04/09/2009

Electronic Signature of Signing Officer or Director

Date