2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006194

FILED Jan 05, 2010 Secretary of State

Entity Name: TECHNOLOGY INSURANCE COMPANY, INC.

Current Principal Place of Business: New Principal Place of Business:

59 MAIDEN LANE 6TH FLOOR

NEW YORK, NY 10038 US

Current Mailing Address: New Mailing Address:

59 MAIDEN LANE 6TH FLOOR

NEW YORK, NY 10038 US

FEI Number: 02-0449082 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST

TALLAHASSEE, FL 323990000 US

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:

Name: MILLER, JAY J

Address: 430 EAST 57TH STREET

City-St-Zip: NEW YORK, NY

Title: T

Name: SCHLACHTER, HARRY
Address: 1427 EAST 17TH STREET
City-St-Zip: BROOKLYN, NY 11230

Title: PD

 Name:
 ZYSKIND, BARRY D

 Address:
 5423 17TH AVENUE

 City-St-Zip:
 BROOKLYN, NY 11204

Title:

Name: UNGAR, STEPHEN

Address: 130 WEST 79TH STREET, APT MD

City-St-Zip: NEW YORK, NY 10024

Title:

Name: KARFUNKEL, MICHAEL
Address: 5417 17TH AVE
City-St-Zip: BROOKLYN, NY 11204

Title:

 Name:
 KARFUNKEL, GEORGE

 Address:
 1671 52ND STREET

 City-St-Zip:
 BROOKLYN, NY 11204

I hereby 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 all other like empowered.

SIGNATURE: STEPHEN UNGAR S 01/05/2010