

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J07461

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** HALCYON UNDERWRITERS, INC.

**Current Principal Place of Business:**

2600 LAKE LUCIEN DRIVE  
SUITE 304  
MAITLAND, FL 32751 US

**New Principal Place of Business:**

**Current Mailing Address:**

2600 LAKE LUCIEN DRIVE  
SUITE 304  
MAITLAND, FL 32751 US

**New Mailing Address:**

**FEI Number:** 59-2656392

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: DOWNS, LINDA S  
Address: 220 S RIDGEWOOD AVENUE  
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: V  
Name: WALKER, CORY T  
Address: 220 S RIDGEWOOD AVENUE  
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: V  
Name: LYONS, PAUL C III  
Address: 2600 LAKE LUCIEN DRIVE, SUITE 330  
City-St-Zip: MAITLAND, FL 32751 US

Title: VS  
Name: GRAMMIG, LAUREL L  
Address: 3101 W DR MARTIN LUTHER KING, SUITE 400  
City-St-Zip: TAMPA, FL 33607 US

Title: T  
Name: MOORE, LYNDA  
Address: 1201 W CYPRESS CREEK RD, SUITE 130  
City-St-Zip: FT LAUDERDALE, FL 33309 US

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: LAUREL L GRAMMIG

VS

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date