

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000995

FILED
Jan 02, 2007
Secretary of State

Entity Name: THE FLORIDA SURETY ASSOCIATION, INC.

Current Principal Place of Business:

1051 WINDERLEY PLACE SYE105
MAITLAND, FL 32751

New Principal Place of Business:

1051 WINDERLEY PLACE
SUITE 105
MAITLAND, FL 32751

Current Mailing Address:

1051 WINDERLEY PLACE STE:105
MAITLAND, FL 32751

New Mailing Address:

1051 WINDERLEY PLACE
SUITE 105
MAITLAND, FL 32751

FEI Number: 05-1584784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEARS, JAMES W
511 N FERNCREEK AVE
ORLANDO, FL 32803 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: D () Delete
Name: CURRAN, MATTHEW E
Address: 2405 LUCIEN WAY
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: LINDQUIST, SARA K
Address: 3445 PEACHTREE RD. N.E. STE:900
City-St-Zip: ATLANTA, GA 30326

Title: D () Delete
Name: DENNIS, MICHAEL P
Address: 1051 WINDERLEY PL. STE: 105
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: DAVIS, PAUL
Address: 2405 LUCIEN WAY
City-St-Zip: MAITLAND, FL 32751

Title: D (X) Delete
Name: BATTENFIELD, MIKE
Address: 200 COLONIAL CTR. PKWY. STE:500
City-St-Zip: LAKE MARY, FL 32746

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: D (X) Change () Addition
Name: BATTENFIELD, MICHAEL
Address: 200 COLONIAL CTR. PKWY. STE:500
City-St-Zip: LAKE MARY, FL 32746

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

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL P. DENNIS

D

01/02/2007

Electronic Signature of Signing Officer or Director

Date