

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000028658

Entity Name: SURETY SPECIALTY GROUP, INC.

FILED  
Jan 08, 2007  
Secretary of State

## Current Principal Place of Business:

385 BELL BRANCH LANE  
JACKSONVILLE, FL 32259

## New Principal Place of Business:

11481 OLD ST AUGUSTINE RD  
STE #104  
JACKSONVILLE, FL 32258

## Current Mailing Address:

P O BOX 600962  
JACKSONVILLE, FL 32260

## New Mailing Address:

FEI Number: 59-3682627

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CENTRELLA, JASON S  
385 BELL BRANCH LANE  
JACKSONVILLE, FL 32259 US

## Name and Address of New Registered Agent:

CENTRELLA, JASON S  
11481 OLD ST AUGUSTINE RD  
STE 104  
JACKSONVILLE, FL 32258 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: JASON S CENTRELLA

01/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CENTRELLA, JASON S  
Address: 385 BELL BRANCH LANE  
City-St-Zip: JACKSONVILLE, FL 32259

Title: SEC ( ) Delete  
Name: CENTRELLA, JOANNE M  
Address: 385 BELL BRANCH LANE  
City-St-Zip: JACKSONVILLE, FL 32259

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CENTRELLA, JASON S  
Address: 11481 OLD ST AUGUSTINE RD #104  
City-St-Zip: JACKSONVILLE, FL 32258

Title: SEC (X) Change ( ) Addition  
Name: CENTRELLA, JOANNE M  
Address: 11481 OLD ST AUGUSTINE RD #104  
City-St-Zip: JACKSONVILLE, FL 32258

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JASON CENTRELLA

P

01/08/2007

Electronic Signature of Signing Officer or Director

Date