2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2005
Secretary of State

DOCUMENT# P01000010993

Entity Name: SURETY MANAGEMENT, INC.

Current Principal Place of Business:

3708 S JOHN YOUNG PKWY
A
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

3708 S JOHN YOUNG PKWY
A
ORLANDO, FL 32839

New Mailing Address:

FEI Number: 65-1074112 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AABBOT, DOUGLAS
3708 S JOHN YOUNG PKWY
A
ORLANDO, FL 32839 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: AABBOT, DOUGLAS
Address: 3708 S JOHN YOUNG PKWY
City-St-Zip: ORLANDO, FL 32839

Title: VSD ( ) Delete
Name: HEFFERNAN, MARK
Address: 10421 MAHOGAMI KEY CIRCLE APT 203
City-St-Zip: MIAMI, FL 33136

Title: T ( ) Delete
Name: HOLMAN, DONNA
Address: 1000 NW 14TH STREET
City-St-Zip: MIAMI, FL 33136

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DONNA HOLMAN T 07/18/2005

Electronic Signature of Signing Officer or Director — Date