

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000165637

FILED  
May 04, 2007  
Secretary of State

Entity Name: NORTHERN CAPITAL INSURANCE COMPANY

## Current Principal Place of Business:

7200 CORPORATE CENTER DRIVE  
SUITE 505  
MIAMI, FL 33126

## New Principal Place of Business:

## Current Mailing Address:

7200 CORPORATE CENTER DRIVE  
SUITE 505  
MIAMI, FL 33126

## New Mailing Address:

FEI Number: 20-1269516      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DIGIORGIO, MARIA L  
7200 CORPORATE CENTER DRIVE  
SUITE 505  
MIAMI, FL 33126 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: D ( ) Delete  
Name: FLETCHER, WAYNE  
Address: 1163 PEREGRINE WAY  
City-St-Zip: WESTON, FL 33327

Title: D ( ) Delete  
Name: LAURIE, JOHN C  
Address: 10804 RIVERBANK TERR.  
City-St-Zip: BRADENTON, FL 34212

Title: D ( ) Delete  
Name: MIGUELEZ, JUAN C  
Address: 10410 SW 128TH PLACE  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: DIGIORGIO, MARIA L ESQ.  
Address: 1830 MERIDIAN AVENUE., UNIT 201  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: FERNANDEZ, ALBERT  
Address: 7200 CORPROATE CENTER DRIVE  
City-St-Zip: MIAMI, FL 33126

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: FLETCHER, WAYNE  
Address: 7200 CORPORATE CENTER DRIVE  
City-St-Zip: MIAMI, FL 33126

Title: D (X) Change ( ) Addition  
Name: LAURIE, JOHN C  
Address: 7200 CORPORATE CENTER DRIVE  
City-St-Zip: MIAMI, FL 33126

Title: D (X) Change ( ) Addition  
Name: MIGUELEZ, JUAN C  
Address: 7200 CORPORATE CENTER DRIVE  
City-St-Zip: MIAMI, FL 33126

Title: D (X) Change ( ) Addition  
Name: DIGIORGIO, MARIA L ESQ.  
Address: 7200 CORPORATE CENTER DRIVE  
City-St-Zip: MIAMI, FL 33126

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

I hereby certify that the information supplied with this filing does not qualify 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: MARIA DIGIORGIO

D

05/04/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date