

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000166154

FILED
Apr 28, 2008
Secretary of State

Entity Name: NORMANDY HARBOR INSURANCE COMPANY, INC.

Current Principal Place of Business:

400 ARTHUR GODFREY ROAD
SUITE 508
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

400 ARTHUR GODFREY ROAD
SUITE 508
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 65-1260086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STILES, MARY ANN
315 PLANT AVE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 32399 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: CFO STATE OF FLORIDA

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCST () Delete
Name: GANZ, SIMON
Address: 5055 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: KLEIN, BENJAMIN
Address: 1311 95TH
City-St-Zip: BAY HARBOR ISLAND, FL

Title: D () Delete
Name: OSTAPCHUK, CAROL
Address: 5151 WILD ROSE WAY
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: ATKINS, KATHLEEN
Address: 1117 SAVANAH TR
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: FEVER, SIMCHA Y
Address: 1688 VTICA AVE
City-St-Zip: BROOKLYN, NY 11234

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCST (X) Change () Addition
Name: GANZ, SIMON
Address: 4512 FARRAGUT ROAD
City-St-Zip: BROOKLYN, NY 11203

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

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

Title: D (X) Change () Addition
Name: ATKINS-GUNTER, KATHLEEN
Address: 1117 SAVANAH TR
City-St-Zip: TALLAHASSEE, FL

Title: D,T (X) Change () Addition
Name: FEUER, SIMCHA Y
Address: 4512 FARRAGUT ROAD
City-St-Zip: BROOKLYN, NY 11203

Title: P () Change (X) Addition
Name: KROUSE, MITCHEL J
Address: 400 ARTHUR GODFREY RD. SUITE 508
City-St-Zip: MIAMI BEACH, FL 33140

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: MITCHEL KROUSE

PRES

04/28/2008

Electronic Signature of Signing Officer or Director

Date