

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000166246

FILED
Apr 30, 2010
Secretary of State

Entity Name: WINDHAVEN INSURANCE COMPANY

Current Principal Place of Business:

5835 BLUE LAGOON DRIVE
SUITE 401
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

5835 BLUE LAGOON DRIVE
SUITE 401
MIAMI, FL 33126

New Mailing Address:

FEI Number: 20-4003938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER, STATE OF FLORIDA
DIVISION OF LEGAL SERVICE OF PROCESS SECTI
ON, 200 E GAINES ST
TALLAHASSEE, FL 32314 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: WHITED, JIMMY E
Address: 815 S ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33146

Title: CFO
Name: WHITED, JIMMY E
Address: 815 S ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33146

Title: STY
Name: SCRUGGS, DAVID
Address: 5917 NEWGATE LN
City-St-Zip: PLANO, TX 75093

Title: D
Name: VALDIVIESO, MANNY
Address: 3082 LIME COURT
City-St-Zip: MIAMI, FL 33133

Title: D
Name: WOLLENBERG, SUSAN
Address: 14201 NIEMAN ST
City-St-Zip: OVERLAND PK, KS 66221

Title: D
Name: TURNER, BEN
Address: 9207 SPRINGWOOD DRIVE
City-St-Zip: AUSTIN, TX 78750

I hereby 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 all other like empowered.

SIGNATURE: JIMMY WHITED

PD

04/30/2010

Electronic Signature of Signing Officer or Director

Date