2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000055401

Entity Name: GRIDIRON INSURANCE UNDERWRITERS, INC.

FILED Nov 17, 2010 Secretary of State

Current Principal Place of Business: New Principal Plac	e of Business:
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6951 W. SUNRISE BLVD. 6971 W. SUNRISE BLVD. PLANTATION, FL 33313

206

PLANTATION, FL 33313

Current Mailing Address: New Mailing Address:

6971 W. SUNRISE BLVD. 6951 W. SUNRISE BLVD. PLANTATION, FL 33313 206

PLANTATION, FL 33313

FEI Number: 20-4720760 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SASTRE, CESAR 6951 W. SUNRISE BLVD. PLANTATION, FL 33313 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title:

DEMOTT, DAVID PRES Name:

6971 W. SUNRISE BLVD STE.206 Address:

City-St-Zip: SUNRISE, FL 33313

Title:

Name: ANDERTON, JOSEPH W VP 6951 W. SUNRISE BLVD Address: SUNRISE, FL 33313 City-St-Zip:

Title:

JACKSON, EDWARD VP Name: 6951 W. SUNRISE BLVD Address: City-St-Zip: SUNRISE, FL 33313

Title:

TURGEON, WILLIAM VP Name: Address: 6951 W. SUNRISE BLVD City-St-Zip: SUNRISE, FL 33313

Title:

Name: HERMANNS, RICK VP Address: 6951 W. SUNRISE BLVD City-St-Zip: SUNRISE, FL 33313

Title:

Name: STEFANOVIC, MILAN VP Address: 6951 W. SUNRISE BLVD. City-St-Zip: SUNRISE, FL 33313

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: CESAR SASTRE **AGT** 11/17/2010