



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 8:00 am
Secretary of State

01-22-2008 90078 017 ***150.00

DOCUMENT # P06000076261 1. Entity Name AMERICAN CAPITAL ASSURANCE CORP.																																																																																																																																									
Principal Place of Business 805 EXECUTIVE CENTER DRIVE WEST SUITE 300 ST PETERSBURG, FL 33702 US			Mailing Address 805 EXECUTIVE CENTER DRIVE WEST SUITE 300 ST PETERSBURG, FL 33702 US																																																																																																																																						
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																																																																																																																																							
City & State Zip Country		City & State Zip Country		4. FEI Number 20-5107413 Applied For <input type="checkbox"/> Not Applicable																																																																																																																																					
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																																									
6. Name and Address of Current Registered Agent MILKEY, KEVIN R 805 EXECUTIVE CENTER DRIVE WEST SUITE 300 ST PETERSBURG, FL 33702																																																																																																																																									
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																																																									
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																																																																																																																																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																						
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																																									
SIGNATURE: <u>Kevin Milkey</u> <u>1/14/08</u> <u>727-821-8765 ext. 202</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																									