

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000149590

FILED  
Jan 19, 2009  
Secretary of State

Entity Name: GRAHAM INSURANCE GROUP, INC.

**Current Principal Place of Business:**

750 EAST PROSPECT ROAD  
FORT LAUDERDALE, FL 33334 US

**New Principal Place of Business:**

**Current Mailing Address:**

750 EAST PROSPECT ROAD  
FORT LAUDERDALE, FL 33334 US

**New Mailing Address:**

FEI Number: 38-3747242      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

VILLARI, DAVID J  
2899 N.E. 26TH COURT  
FORT LAUDERDALE, FL 33306 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: P ( ) Delete  
Name: GRAHAM, IAN H  
Address: 248 BAHAMA LANE  
City-St-Zip: PALM BEACH, FL 33480 US

Title: VT ( ) Delete  
Name: VILLARI, DAVID J  
Address: 2899 N.E. 26TH COURT  
City-St-Zip: FORT LAUDERDALE, FL 33306 US

Title: VS ( ) Delete  
Name: GIFFORD, ERIC S  
Address: 740 S.W. 5TH STREET  
City-St-Zip: BOCA RATON, FL 33486 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: ERIC S. GIFFORD

VP

01/19/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date