2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# P08000007811

Entity Name: SPECIALIZED INSURANCE INC.

Current Principal Place of Business:

13313 US HWY. 19
HUDSON, FL 34667

New Principal Place of Business:

6220 RIDGE RD
PORT RICHEY, FL 34668

Current Mailing Address:

13313 US HWY. 19
HUDSON, FL 34667

New Mailing Address:

204 MEDFORD AVE
PATCHOGUE, NY 11772

FEI Number: 75-3266893 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSSI, RICHARD
13818 JUDY AVE.
HUDSON, FL 34667 US

Name and Address of New Registered Agent:

PEATMAN, DONNA
13818 JUDY AVE.
HUDSON, FL 34667 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: DONNA PEATMAN 01/07/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ROSSI, RICHARD
Address: 204 MEDFORD AVE.
City-St-Zip: PATCHOGUE, NY 11772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RICHARD ROSSI CEO 01/07/2009
Electronic Signature of Signing Officer or Director Date