

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000062543

FILED
Jan 05, 2007
Secretary of State

Entity Name: ASPEN INSURANCE GROUP, INC.

Current Principal Place of Business:

22763 STATE ROAD 7
BOCA RATON, FL 33428 US

New Principal Place of Business:

Current Mailing Address:

AARON S PRELAK
6069 OLD COURT RD #108
BOCA RATON, FL 33433

New Mailing Address:

FEI Number: 65-0434924 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRELAK, AARON S
6069 OLD COURT RD
108
BOCA RATON, FL 33433 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: PRELAK, AARON S
Address: 6069 OLD CT. RD., #108
City-St-Zip: BOCA RATON, FL 33433

Title: S () Delete
Name: PRELAK, BARBARA R
Address: 6069 OLD COURT RD., #108
City-St-Zip: BOCA RATON, FL 33433

Title: C () Delete
Name: PRELAK, LYNDIA S
Address: 22415 SW 61ST WAY APT 206
City-St-Zip: BOCA RATON, FL 33428

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 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: AARON PRELAK

P

01/05/2007

Electronic Signature of Signing Officer or Director

Date