

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P93000077569

FILED
May 24, 2007
Secretary of State

Entity Name: CASUALTY INSURANCE SERVICES, INC.

Current Principal Place of Business:

1100 MONTANA STREET
ORLANDO, FL 32803 US

New Principal Place of Business:

800 NORTH FERNCREEK AVENUE
ORLANDO, FL 32803 US

Current Mailing Address:

1206 N. MILLS AVE
SUITE B
ORLANDO, FL 32803 US

New Mailing Address:

800 NORTH FERNCREEK AVENUE
ORLANDO, FL 32803 US

FEI Number: 59-3233277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCARBORO, KAYTON
18334 WEST SHORE LANE
GROVELAND, FL 34736 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: KAYTON SCARBORO

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: SCARBORO, KAYTON D
Address: 11032 COUNTRY HILL RD
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: SCARBORO, KAYTON
Address: 18334 W SHORE LN
City-St-Zip: GROVELAND, FL 34736

Title: T (X) Delete
Name: ALEXANDER, SANDRA L
Address: 424 OCOEE HILLS ROAD
City-St-Zip: OCOEE, FL 34761 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCARBORO, KAYTON
Address: 18334 WEST SHORE LANE
City-St-Zip: GROVELAND, FL 34736 US

Title: PST (X) Change () Addition
Name: SCARBORO, KAYTON
Address: 18334 W SHORE LN
City-St-Zip: GROVELAND, FL 34736 US

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: KAYTON SCARBORO

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05/24/2007

Electronic Signature of Signing Officer or Director

Date