2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000044330

Entity Name: MACDUFF PINELLAS UNDERWRITERS, INC.

FILED Apr 01, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
111 2ND AVENUE NE, SUITE 610 ST. PETERSBURG, FL 33701 US				111 2ND AVENUE NE ST. PETERSBURG, FL 33701 US				
Current Mailing Address:				New Mailing Address:				
111 2ND AVENUE NE, SUITE 610 ST. PETERSBURG, FL 33701 US				3101 W. DR. MARTIN LUTHER KING JR. BLVD. SUITE 400 TAMPA, FL 33607 US				
FEI Number:	59-3328654	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certifica	ate of Status Desi	red ()
Name and	Address of C	urrent Registered Agent:		Name and	Address o	f New Reg	jistered Agent	:
1201 HAYS TALLAHAS	SSEE, FL 3230		rpose of	f changing it	s registere	d office or r	registered agen	t, or both,
SIGNATUF	RE:							
	Electroni	c Signature of Registered Agen	t				Date	
Election Can	npaign Financing	Trust Fund Contribution ().						
OFFICERS	S AND DIRECT	ORS:		ADDITION	S/CHANGI	ES TO OFF	FICERS AND D	IRECTORS
Title: Name: Address: City-St-Zip:	BROWN, J. POV	GEWOOD AVENUE		Title: Name: Address: City-St-Zip:		(X) Change //ICHAEL J DREWS AVEI ERDALE, FL	NUE	
Title: Name: Address: City-St-Zip:	WALKER, CORY	GEWOOD AVENUE		Title: Name: Address: City-St-Zip:		(X) Change ORY T SEWOOD AV SEACH, FL 3	ENUE	
Title: Name: Address: City-St-Zip:	GRAMMIG, LAU	R. BOULEVARD, SUITE 400		Title: Name: Address: City-St-Zip:	VS GRAMMIG, 3101 W. DR TAMPA, FL	. MARTIN LU	() Addition	E 400
Title: Name: Address: City-St-Zip:	DONEGAN, JR.,	R. BOULEVARD, SUITE 400		Title: Name: Address: City-St-Zip:			* *	E 400
Title: Name: Address: City-St-Zip:	FAILLA, JOSEPI	GEWOOD AVENUE		Title: Name: Address: City-St-Zip:		(X) Change DY DREWS AVEI ERDALE, FL	NUE	
Title: Name: Address: City-St-Zip:	COLANGELO, K	E NE, SUITE 610		Title: Name: Address: City-St-Zip:	P COLANGEL 111 2ND AV ST. PETERS	*		

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: LAUREL L. GRAMMIG VS 04/01/2009