## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000028636

Entity Name: MAITLAND UNDERWRITERS, INC.

FILED Feb 05, 2008 Secretary of State

Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
745 ORIEN SUITE 1251 ALTAMONT		EL 32701			
Current Mailing Address:			New Mailing Ad	New Mailing Address:	
745 ORIEN SUITE 1251 ALTAMONT					
FEI Number:	59-3560794	FEI Number Applied For ( )	FEI Number Not Applicable (	) Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
PACE, ERICK L 745 ORIENTA AVE. SUITE 1251 ALTAMONTE SPRINGS, FL 32701 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.					
SIGNATUR	E:				
	Electronic	Signature of Registered Agent	-	Date	
Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITIONS/CH/	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DCP () E REGISTER, LLO 745 ORIENTA AV ALTAMONTE SPI	E., SUITE #1251	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV ()E REGISTER, LLO 745 ORIENTA AV ALTAMONTE SPI	E., SUITE #1251	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PACE, ERICK 745 ORIENTA AV	Delete E., SUITE #1251 RINGS, FL 32701	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	REGISTER, TIMO 745 ORIENTA AV		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	FITZGERALD, DA 745 ORIENTA AV		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	HOROWITZ, RAN 745 ORIENTA AV		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: RANDY HOROWITZ DV 02/05/2008