

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001326

FILED  
Jan 20, 2006  
Secretary of State

Entity Name: FLORIDA DIVISION OF UNITED SECURITIES ALLIANCE, INC.

**Current Principal Place of Business:**

7730 E BELLEVIEW AVE  
STE AG-9  
GREENWOOD VILLAGE, CO 80111

**New Principal Place of Business:**

**Current Mailing Address:**

7730 E BELLEVIEW AVE  
STE AG-9  
GREENWOOD VILLAGE, CO 80111

**New Mailing Address:**

FEI Number: 58-2097636      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE CO.  
1201 HAYS ST  
TALLAHASSEE, FL 32301      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: PADILLA, JOE  
Address: 7730 E. BELLEVIEW AVE, STE AG-9  
City-St-Zip: GREENWOOD VILLAGE, CO 80111

Title: VP/T ( ) Delete  
Name: MEYER, SHAWNA R  
Address: 7730 E. BELLEVIEW AVE, STE AG-9  
City-St-Zip: GREENWOOD VILLAGE, CO 80111

Title: S ( ) Delete  
Name: PEARN, JON  
Address: 7730 E. BELLEVIEW AVE, STE AG-9  
City-St-Zip: GREENWOOD VILLAGE, CO 80111

Title: D ( ) Delete  
Name: PADILLA, JOE  
Address: 7730 E. BELLEVIEW AVE, STE AG-9  
City-St-Zip: GREENWOOD VILLAGE, CO 80111

Title: D ( ) Delete  
Name: MEYER, SHAWNA R  
Address: 7730 E. BELLEVIEW AVE, STE AG-9  
City-St-Zip: ENGLEWOOD, CO 80111

Title: D ( ) Delete  
Name: PEARN, JON  
Address: 7730 E. BELLEVIEW AVE., STE AG-9  
City-St-Zip: GREENWOOD VILLAGE, CO 80111

**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:

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: SHAWNA R. MEYER

VP/T

01/20/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date