

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15708

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: SERVICE FINANCE CORPORATION

## Current Principal Place of Business:

419 KEY EXECUTIVE BLDG.  
104 CRANDON BLVD  
KEY BISCAYNE, FL 33149

## New Principal Place of Business:

## Current Mailing Address:

419 KEY EXECUTIVE BLDG.  
104 CRANDON BLVD  
KEY BISCAYNE, FL 33149

## New Mailing Address:

FEI Number: 13-3164478

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPENCER, S.A.  
251 CRANDON BLVD.  
#164  
KEY BISCAYNE, FL 33149 US

## Name and Address of New Registered Agent:

MARY M. SPENCER  
251 CRANDON BLVD.  
#164  
KEY BISCAYNE, FL 33149 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.

SIGNATURE: MARY M. SPENCER

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DONAGHY, JAMES W.  
Address: 7 RIDGEWOOD DRIVE  
City-St-Zip: BRIDGEWATER, CT 06752

Title: CD ( ) Delete  
Name: SPENCER, S.A.  
Address: 251 CRANDON BLVD. #164  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VS (X) Delete  
Name: LEISCHNER, STEVEN  
Address: 1979 DOGWOOD DR  
City-St-Zip: SCOTCH PLAINS, NJ 07076

Title: AS ( ) Delete  
Name: DENIS, LYNNE  
Address: 630 THIRD AVENUE 7TH FLOOR  
City-St-Zip: NEW YORK, NY 10017

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VS (X) Change ( ) Addition  
Name: LEISCHNER, STEVEN  
Address: 1979 DOGWOOD DR  
City-St-Zip: SCOTCH PLAINS, NJ 07076

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: AS (X) Change ( ) Addition  
Name: DENIS, LYNNE  
Address: 45 WEST 45TH STREET, 12TH FLOOR  
City-St-Zip: NEW YORK, NY 10036

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: STEVEN LEISCHNER

VS

04/23/2009

Electronic Signature of Signing Officer or Director

Date