

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2005 8:00 am
Secretary of State

01-26-2005 90023 026 ***150.00

DOCUMENT # P99000110103

1. Entity Name
UNITED SETTLEMENT SERVICE AFFILIATES, INC.



Principal Place of Business
**6444 US HWY 41 N
APOLLO BEACH, FL 33572**

Mailing Address
**6213 MARBELLA BLVD
APOLLO BEACH, FL 33572**

50006725



2. Principal Place of Business
6544 US 41 North

3. Mailing Address
6544 US 41 North

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 208B

Suite 208B

City & State

City & State

Apollo Beach, Florida

Apollo Beach, Florida

Zip
33572

Country
USA

Zip
33572

Country
USA

01142005

Chg-P

CR2E034 (10/03)

4. FEI Number
59-3612763

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**VANDERMAST, LEONARD III
6213 MARBELLA BLVD
APOLLO BEACH, FL 33572**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Leonard Vandermaast, III

Leonard Vandermaast, III President/Agent

1/24/05

(Signature, typed or printed name of registered agent and title if not public)

(NOTE: Registered agent signature required when re-stating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
VANDERMAST, LEONARD
6213 MARBELLA BLVD
APOLLO BEACH, FL 33572** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Leonard Vandermaast, III

Leonard Vandermaast, III President

1/24/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(813) 645-4588