

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000045736

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: COMMON SENSE FINANCIAL SERVICES, INC.

## Current Principal Place of Business:

1091 E. SHORE DRIVE  
WEST PALM BEACH, FL 33406

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 17782  
W PALM BEACH, FL 33416

## New Mailing Address:

FEI Number: 65-0910294

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MARTINEZ, CHARLES M  
1091 EAST SHORE DRIVE  
WEST PALM BEACH, FL 33406 US

## Name and Address of New Registered Agent:

DURAN-MARTINEZ, JOSEPHINE M  
1091 EAST SHORE DRIVE  
WEST PALM BEACH, FL 33406 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: JOSEPHINE M. DURAN-MARTINEZ

04/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MARTINEZ, CHARLES M  
Address: 1091 EAST SHORE DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D ( ) Delete  
Name: DURAN-MARTINEZ, JOSEPHINE  
Address: 1091 EAST SHORE DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33406

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: DURAN-MARTINEZ, JOSEPHINE M PRES  
Address: 1091 EAST SHORE DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D (X) Change ( ) Addition  
Name: LARA, CARMEN VPRES  
Address: 228 ISLAND SHORE DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33413

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: JOSEPHINE M. DURAN-MARTINEZ

D

04/14/2009

Electronic Signature of Signing Officer or Director

Date