

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000075357

Entity Name: UNISOURCE TAMPA, INC.

FILED
Sep 24, 2009
Secretary of State

Current Principal Place of Business:

2034 HARVARD STREET
SARASOTA, FL 34237

New Principal Place of Business:

718 SIESAT KEY CIRCLE
SARASOTA, FL 34242

Current Mailing Address:

2034 HARVARD STREET
SARASOTA, FL 34237

New Mailing Address:

718 SIESAT KEY CIRCLE
SARASOTA, FL 34242

FEI Number: 65-0863809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KOFLER, CHRISTIAN C
2034 HARVARD STREET
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

KOFLER, CHRISTIAN C
718 SIESTA KEY CIRCLE
SARASOTA, FL 34242 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:

09/24/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KOFLER, CHRISTIAN C
Address: 2034 HARVARD STREET
City-St-Zip: SARASOTA, FL 34237

Title: D () Delete
Name: KOFLER, CAROLYN A
Address: 2034 HARVARD STREET
City-St-Zip: SARASOTA, FL 34237

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KOFLER, CHRISTIAN C
Address: 718 SIESTA KEY CIRCLE
City-St-Zip: SARASOTA, FL 34242

Title: D (X) Change () Addition
Name: KOFLER, CAROLYN A
Address: 718 SIESTA KEY CIRCLE
City-St-Zip: SARASOTA, FL 34242

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: CHRIS KOFLER

PRES

09/24/2009

Electronic Signature of Signing Officer or Director

Date