

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000001436

**Entity Name:** UNITED SERVANTS ABROAD, INC.**Current Principal Place of Business:**505 S FLAGLER DRIVE  
SUITE 1100  
WEST PALM BEACH, FL 33401**Current Mailing Address:**P.O. BOX 3475  
WEST PALM BEACH, FL 33402**FEI Number:** 65-0821937**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JONES FOSTER SERVICE, LLC  
505 S FLAGLER DRIVE  
SUITE 1100  
WEST PALM BEACH, FL 33401 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD
Name	FORMAN, WALTER
Address	28 SHADY LANE
City-State-Zip:	TEQUESTA FL 33469

Title	D
Name	RICHARDSON, DAVID
Address	5715 HIGHWAY 85 N #640
City-State-Zip:	CRESTVIEW FL 32536

Title	D
Name	PETERSON, FRED JR
Address	1249 SW ROBYS WAY
City-State-Zip:	PALM CITY FL 34990

Title	VP, DIRECTOR
Name	KERR, WALTER
Address	12451 GRUMMAN WAY
City-State-Zip:	PORT ST. LUCIE FL 34987

Title	DT
Name	ELMORE, KATHRYN
Address	14530 ROLLING ROCK
City-State-Zip:	WELLINGTON FL 33414

Title	D
Name	SELBY, DWIGHT
Address	1535 OAK FOREST DRIVE
City-State-Zip:	ORMOND BEACH FL 32174

Title	D
Name	HOUGH, BEATRICE
Address	1957 FITTIN CT
City-State-Zip:	LAKE WORTH FL 33463

Title	DIRECTOR
Name	BRANCH, MIKE
Address	925 WILLSTON PARK POINT
City-State-Zip:	LAKE MARY FL 32746

**Continues on page 2**

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KATHRYN S. ELMORE**TREASURER****02/11/2013**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                 DIRECTOR  
Name                OZIER, CALVIN  
Address             823 E.HOLMES RD.  
City-State-Zip:    MEMPHIS TN 38116

Title                 CEO  
Name                DONALD, ELMORE  
Address             14530 ROLLING ROCK PL  
City-State-Zip:    WELLINGTON FL 33414