2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 521773

Entity Name: UCAC, INC.

FILED Apr 07, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5737 CORPORATE WAY WEST PALM BCH, FL 334072097 US

Current Mailing Address: New Mailing Address:

BERTRAM F. COLLINS PO BOX 10631 RIVIERA BEACH, FL 33419 US

FEI Number: 04-2058330 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COLLINS, BERTRAM F.

5737 CORPORATE WAY
WEST PALM BCH, FL 33407 US

COLLINS, BERTRAM F.

5737 CORPORATE WAY
WEST PALM BCH, FL 33407 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: BERTRAM F. COLLINS 04/07/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

BOYNTON BEACH, FL 33436

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

BOYNTON BEACH, FL 33436

Title: () Delete Title: (X) Change () Addition COLLINS, BERTRAM F COLLINS, BERTRAM F. Name: Name: 111 FIARVIEW WEST 111 FIARVIEW WEST Address: Address: City-St-Zip: TEQUESTA, FL 33469 City-St-Zip: TEQUESTA, FL 33469

Title: SVD () Delete Title: () Change () Addition

 Name:
 COLLINS, JOAN B.
 Name:

 Address:
 111 FAIRVIEW WEST
 Address:

 City-St-Zip:
 TEQUESTA, FL 33469
 City-St-Zip:

Title: PD () Delete Title: PD (X) Change () Addition
Name: GERHARDT, MARJORIE R.
Address: 4745 NOLINA LANE Address: 4745 NOLINA LANE

Title: PD (X) Change () Addition
Name: GERHARDT, MARJORIE R.
Address: 4745 NOLINA LANE

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.

City-St-Zip:

SIGNATURE: BERTRAM F. COLLINS CTD 04/07/2009