


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008 8:00 am
Secretary of State

01-14-2008 90108 019 ***150.00

DOCUMENT # F00000001326						
1. Entity Name FLORIDA DIVISION OF UNITED SECURITIES ALLIANCE, INC.						
Principal Place of Business 7730 E BELLEVIEW AVE STE AG-9 GREENWOOD VILLAGE, CO 80111			Mailing Address 7730 E BELLEVIEW AVE STE AG-9 GREENWOOD VILLAGE, CO 80111			
2. Principal Place of Business - No P.O. Box # 7730 E. Belleview Ave.		3. Mailing Address 7730 E. Belleview Ave				
Suite, Apt. #, etc. Suite B103		Suite, Apt. #, etc. Suite B103				
City & State Greenwood Village, CO		City & State Greenwood Village, CO				
Zip 80111	Country USA	Zip 80111	Country USA	4. FEI Number 58-2097636		
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable		
6. Name and Address of Current Registered Agent CORPORATION SERVICE CO. 1201 HAYS ST TALLAHASSEE, FL 32301			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____						
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11-			
TITLE P	NAME PEARN, JON		<input checked="" type="checkbox"/> Delete	TITLE President	NAME Jeff Cannella	
STREET ADDRESS 7730 E. BELLEVIEW AVE, STE AG-9	CITY-ST-ZIP GREENWOOD VILLAGE, CO 80111		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS 7730 E. Belleview Ave, Ste B103	CITY-ST-ZIP Greenwood Village, CO 80111	
TITLE VP/T	NAME MEYER, SHAWNA R		<input checked="" type="checkbox"/> Delete	TITLE VP/Secretary	NAME Patrick Sutherland	
STREET ADDRESS 7730 E. BELLEVIEW AVE, STE AG-9	CITY-ST-ZIP GREENWOOD VILLAGE, CO 80111		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS 7730 E. Belleview Ave, Ste B103	CITY-ST-ZIP Greenwood Village, CO 80111	
TITLE S	NAME PEARN, JON		<input checked="" type="checkbox"/> Delete	TITLE S	NAME PEARN, JON	
STREET ADDRESS 7730 E. BELLEVIEW AVE, STE AG-9	CITY-ST-ZIP GREENWOOD VILLAGE, CO 80111		<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS 7730 E. BELLEVIEW AVE, STE AG-9	CITY-ST-ZIP GREENWOOD VILLAGE, CO 80111	
TITLE D	NAME JONES, MICHAEL		<input type="checkbox"/> Delete	TITLE D	NAME JONES, MICHAEL	
STREET ADDRESS 7730 E. BELLEVIEW AVE, STE AG-9	CITY-ST-ZIP GREENWOOD VILLAGE, CO 80111		<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS 7730 E. BELLEVIEW AVE, STE AG-9	CITY-ST-ZIP GREENWOOD VILLAGE, CO 80111	
TITLE D	NAME SUTHERLAND, PATRICK		<input type="checkbox"/> Delete	TITLE D	NAME SUTHERLAND, PATRICK	
STREET ADDRESS 7730 E. BELLEVIEW AVE, STE AG-9	CITY-ST-ZIP ENGLEWOOD, CO 80111		<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS 7730 E. BELLEVIEW AVE, STE AG-9	CITY-ST-ZIP ENGLEWOOD, CO 80111	
TITLE S	NAME PEARN, JON		<input type="checkbox"/> Delete	TITLE S	NAME PEARN, JON	
STREET ADDRESS 7730 E. BELLEVIEW AVE, STE AG-9	CITY-ST-ZIP GREENWOOD VILLAGE, CO 80111		<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS 7730 E. BELLEVIEW AVE, STE AG-9	CITY-ST-ZIP GREENWOOD VILLAGE, CO 80111	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Jeff Cannella 1-8-08 303-792-0500

 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #