

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2004 8:00 am
Secretary of State

04-14-2004 90030 035 ***150.00

DOCUMENT # F00000001671

1. Entity Name
UNICORN FINANCIAL SERVICES, INC.



Principal Place of Business
**3520 THOMASVILLE RD
SUITE 500
TALLAHASSEE, FL 32308**

Mailing Address
**29 N WACKER DRIVE
SUITE 603
CHICAGO, IL 60606**

24041102



01062004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
36-4179522

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS *see attached*

TITLE	CD
NAME	LANDERS, JOSEPH W
STREET ADDRESS	3520 THOMASVILLE RD SUITE 500
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	PS
NAME	MILLS, CECIL LA DON
STREET ADDRESS	3520 THOMASVILLE RD SUITE 500
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	CAO
NAME	KLIMKOWSKI, ROBERTA J
STREET ADDRESS	29 N WACKER DRIVE SUITE 603
CITY-ST-ZIP	CHICAGO, IL 60606
TITLE	CFO
NAME	NANCE, BLAIR T
STREET ADDRESS	29 N WACKER DRIVE SUITE 603
CITY-ST-ZIP	CHICAGO, IL 60606
TITLE	D
NAME	LIFFMANN, JOEL
STREET ADDRESS	200 GREENWICH AVE 3RD FLOOR
CITY-ST-ZIP	GREENWICH, CT 06830
TITLE	D
NAME	FEINBERG, LARRY N
STREET ADDRESS	200 GREENWICH AVE 3RD FLOOR
CITY-ST-ZIP	GREENWICH, CT 06830

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Blair T. Nance* **CHIEF FINANCIAL OFFICER**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/2004 *312-759-3625*
Date Daytime Phone #

#FD00000001671
24041102

Attachment to
Florida Department of State
Division of Corporations
2004 Annual Report
For
Unicorn Financial Services, Inc.

Block 10
Additions to Officers in 10

Title Name Street Address City-St-Zip	V. P. Information Technology David Ochs 29 N. Wacker Drive, Suite 603 Chicago IL 60606
Title Name Street Address City-St-Zip	V.P. Operation Nicholas Hopfauf 1250 S. Clearview Avenue, Suite 100 Mesa, AZ 85208
Title Name Street Address City-St-Zip	V.P Marketing Susan Richardson 3520 Thomasville Road, Suite 500 Tallahassee, FL 32309
Title Name Street Address City-St-Zip	D Alfred P. West One Freedom Valley Dr. Oaks, PA 19456-1100
Title Name Street Address City-St-Zip	D Frederick Hammer 712 5th Avenue New York, NY 10019