


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90145 019 ***150.00

DOCUMENT # F00000001671	
1. Entity Name UNICORN FINANCIAL SERVICES, INC.	

Principal Place of Business 1701 HERMITAGE BLVD SUITE 201 TALLAHASSEE, FL 32308	Mailing Address 29 N WACKER DRIVE SUITE 603 CHICAGO, IL 60606
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DO NOT WRITE IN THIS SPACE



01052006 No Chg-P CR2E034 (11/05)

4. FEI Number 36-4179522	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD LANDERS, JOSEPH W 1701 HERMITAGE BLVD SUITE 201 TALLAHASSEE, FL 32308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS MILLS, CECIL LA DON 1701 HERMITAGE BLVD SUITE 201 TALLAHASSEE, FL 32308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CAO KLIMKOWSKI, ROBERTA J 29 N WACKER DRIVE SUITE 603 CHICAGO, IL 60606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO NANCE, BLAIR T 29 N WACKER DRIVE SUITE 603 CHICAGO, IL 60606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIFFMANN, JOEL 200 GREENWICH AVE 3RD FLOOR GREENWICH, CT 06830
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FEINBERG, LARRY N 200 GREENWICH AVE 3RD FLOOR GREENWICH, CT 06830

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IN THIS SPACE**

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: Robert A Klimkowski **ROBERTA KLIMKOWSKI** 125/06 312-759-3622
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40077099

F000000001671

**Attachment to
Florida Department of State
Division of Corporations
2006 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 1701 Hermitage Boulevard, Suite 201 Tallahassee, FL 32308
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