


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 22, 2006 08:00 A
Secretary of State

DOCUMENT # F00000005190 1. Entity Name U.S. PUBLIC FINANCE, INC.	
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Principal Place of Business 1101 NORTH LAKE DESTINY ROAD, SUITE 225 MAITLAND, FL 32751	Mailing Address 1101 NORTH LAKE DESTINY ROAD, SUITE 225 MAITLAND, FL 32751
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DO NOT WRITE IN THIS SPACE



01102006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3670084	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

NOGA, GEORGE K
1101 NORTH LAKE DESTINY ROAD, SUITE 225
MAITLAND, FL 32751

**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)
Signature, typed or printed name of registered agent and title if applicable DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

000000476450
04/06/06-80011-003 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD NOGA, GEORGE K 1101 NORTH LAKE DESTINY ROAD, SUITE 225 MAITLAND, FL 32751
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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: *[Signature]* 3/20/06 407-875-0075
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #