


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2005 8:00 am
Secretary of State

03-08-2005 90174 029 ***158.75

DOCUMENT # F04000002823 1. Entity Name UNITED HOME LOANS USA, INC.					
Principal Place of Business 3 WESTBROOK CENTER, SUITE 1010 WESTCHESTER, IL 60154			Mailing Address 3 WESTBROOK CENTER, SUITE 1010 WESTCHESTER, IL 60154		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		02112005 Chg-P CR2E034 (10/03)	
4. FEI Number 20-0206071				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	
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, 2005 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
PTD DULLA, MICHAEL <input type="checkbox"/> Delete 3 WESTBROOK CENTER, SUITE 1010 WESTCHESTER, IL 60154		SD CANNATA, ANDREA <input type="checkbox"/> Delete 3 WESTBROOK CENTER, SUITE 1010 WESTCHESTER, IL 60154		S CANNATA, ANDREA <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3 WESTBROOK CENTER, SUITE 1010 WESTCHESTER, IL 60154	
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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:		Michael A. Dulla 2/28/05 708-531-8317		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #	