2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004367

TOMPKINS, A. STUART

SOUTHFIELD, MI 48075

25800 NORTHWESTERN HWY., SUITE 1000

Name:

Address: City-St-Zip:

Entity Name: BROKER'S FINANCIAL SERVICES SOUTHEAST, INC.

FILED Feb 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 19500 MIDDLEBELT ROAD SUITE 360W LIVONIA, MI 48152 **Current Mailing Address: New Mailing Address:** 14499 N. DALE MABRY SUITE 215 SOUTH TAMPA, FL 33618 FEI Number: 20-1906713 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HORTON, GERALD W 14499 N. DALE MABRY, SUTIE 215 SOUTH TAMPA, FL 33618 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition HORTON, GERALD W Name: Name: 14499 N. DALE MABRY, SUITE 215 SOUTH Address: Address: City-St-Zip: TAMPA, FL 33618 City-St-Zip: Title: Title: () Delete () Change () Addition HORTON, SUSAN M Name: Name: 14499 N. DALE MABRY, SUITE 215 SOUTH Address: Address: TAMPA, FL 33618 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: GERALD W. HORTON PRES 02/02/2009