2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006675

Entity Name: UNIVERSAL UNDERWRITERS SERVICE CORPORATION

FILED Jul 01, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
7045 COLLEGE BLVD. OVERLAND PARK, KS 66211					
Current Mailing Address:			New Mailing Address:		
1400 AMERICAN LANE SCHAUMBURG, IL 60196					
FEI Number: 4	43-1269296	FEI Number Applied For () FEI Num	nber Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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					
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name:	CUO () D APPELBAUM, JO	elete EL A	Title: Name:	DVP (X) Change () Addition APPELBAUM, JOEL A	
Address: City-St-Zip:	7045 COLLEGE I OVERLAND PARI		Address: City-St-Zip:	7045 COLLEGE BLVD. OVERLAND PARK, KS 66211	
Title:		Pelete	Title:	DSVP (X) Change () Addition	
Name: Address:	RUSSELL, ALFO		Name: Address:	MCCAFFERTY, TERENCE M 7045 COLLEGE BLVD.	
City-St-Zip:	OVERLAND PARI	K, KS 66211	City-St-Zip:	OVERLAND PARK, KS 66211	
Title:		Pelete	Title:	DPRE (X) Change () Addition	
Name: Address:	KANE, DENNIS G 7045 COLLEGE I		Name: Address:	FUNDUM, CRAIG J 7045 COLLEGE BLVD.	
City-St-Zip:	OVERLAND PARI		City-St-Zip:	OVERLAND PARK, KS 66211	
Title:		Pelete	Title:	DSEC (X) Change () Addition	
Name:	MCCAFFERTY, T		Name:	KERRIGAN, DENNIS	
Address: City-St-Zip:	7045 COLLEGE I OVERLAND PARI		Address: City-St-Zip:	1400 AMERICAN LANE SCHAUMBURG, IL 60196	
Title: Name: Address: City-St-Zip:	PCEO (X) D BRADLEY, THOM 7045 COLLEGE D OVERLAND PARI	BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	, ,	Delete	Title:	() Change () Addition	
Name: Address:	BOWERS, DAVID 1400 AMERICAN		Name: Address:		
City-St-Zip:	SCHAUMBURG, I		City-St-Zip:		

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.

SIGNATURE: DENNIS F. KERRIGAN

DSEC

07/01/2009

Electronic Signature of Signing Officer or Director

Date