

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 18, 2007 8:00 am**  
**Secretary of State**

01-18-2007 90139 001 \*\*\*150.00

**DOCUMENT # F06000007952**

1. Entity Name  
CUSTOMERONE FINANCIAL NETWORK, INC.



Principal Place of Business  
8100 NATIONS WAY  
JACKSONVILLE, FL 32256

Mailing Address  
8100 NATIONS WAY  
JACKSONVILLE, FL 32256

**60003701**



01082007 Chg-P CR2E034 (12/06)

4. FEI Number  
**43-1823879**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

**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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE	C	<input type="checkbox"/> Delete
NAME	CLEMENTS, ROBERT M	
STREET ADDRESS	8100 NATIONS WAY	
CITY-ST-ZIP	JACKSONVILLE, FL 32256	
TITLE	VC	<input type="checkbox"/> Delete
NAME	WILSON, W. BLAKE	
STREET ADDRESS	8100 NATIONS WAY	
CITY-ST-ZIP	JACKSONVILLE, FL 32256	
TITLE	D	<input type="checkbox"/> Delete
NAME	MEEKS, GARY A	
STREET ADDRESS	8100 NATIONS WAY	
CITY-ST-ZIP	JACKSONVILLE, FL 32256	
TITLE	D	<input type="checkbox"/> Delete
NAME	FOREGGER, ROBERT C	
STREET ADDRESS	8100 NATIONS WAY	
CITY-ST-ZIP	JACKSONVILLE, FL 32256	
TITLE	P	<input type="checkbox"/> Delete
NAME	TROTTER III, FRANCIS O	
STREET ADDRESS	8100 NATIONS WAY	
CITY-ST-ZIP	JACKSONVILLE, FL 32256	
TITLE	VP	<input type="checkbox"/> Delete
NAME	AMATO, VINCENT F	
STREET ADDRESS	8100 NATIONS WAY	
CITY-ST-ZIP	JACKSONVILLE, FL 32256	

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<i>Thomas A. Haide</i>	
STREET ADDRESS	<i>8100 Nations Way</i>	
CITY-ST-ZIP	<i>Jacksonville FL 32256</i>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:**

*Thomas A. Haide*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*1/9/07*

Date

*904.281.6000*

Daytime Phone #

ATTACHMENT



60003701  
#F06000007952

January 16, 2007

Division of Corporations  
2670 Executive Center Circle  
Suite 100  
Tallahassee, FL 32301

**VIA US POSTAL SERVICE OVERNIGHT DELIVERY**

Re: CustomerOne Financial Network, Inc. 2007 Annual Report, FIEN 43-1823879

Dear Sir Madam:

Please find enclosed the completed 2007 Annual Report for CustomerOne Financial Network, Inc. Also included is check #1174 in the amount of \$150.00 for the annual fee.

Please contact Ursula E. Baum, at (904) 332-7659, if you have any questions or require any additional information.

Thank you,

A handwritten signature in cursive script, appearing to read "Mark Baum".

Mark G. Baum  
Vice President  
Corporate and Securities Counsel

ueb:

enc: