

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002589

FILED
Mar 23, 2009
Secretary of State

Entity Name: CSDVRS MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

600 CLEVELAND STREET
SUITE 1000
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

600 CLEVELAND STREET
SUITE 1000
CLEARWATER, FL 33755

New Mailing Address:

FEI Number: 20-5986005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Title: PSD () Delete
Name: BELANGER, SEAN
Address: 600 CLEVELAND STREET, SUITE 1000
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: GASHMAN, GILLIS
Address: 75 STATE STREET, STE 2500
City-St-Zip: BOSTON, MA 02109

Title: D () Delete
Name: SOUKUP, BENJAMIN J JR.
Address: 102 N KORHN PLACE
City-St-Zip: SIOUX FALLS, SD 57103

Title: D () Delete
Name: TIRABASSI, SALVATORE
Address: 75 STATE STREET, STE 2500
City-St-Zip: BOSTON, MA 02109

Title: SECR () Delete
Name: WAGNER, STACY
Address: 600 CLEVELAND STREET, SUITE 1000
City-St-Zip: CLEARWATER, FL 33755

Title: DIR (X) Delete
Name: GUNTHER, CHRIS
Address: 390 PARK AVE. 4TH FLOOR
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PHILLIPS, WADE
Address: 75 STATE STREET, STE 2500
City-St-Zip: BOSTON, MA 02109

Title: TREA (X) Change () Addition
Name: STRECKER, MICHAEL
Address: 600 CLEVELAND STREET, SUITE 1000
City-St-Zip: CLEARWATER, FL 33755

Title: () Change () Addition
Name:
Address:
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: MICHAEL STRECKER

TREA

03/23/2009

Electronic Signature of Signing Officer or Director

Date